पावर ट्रॉंसमिशन कारपोरेशन ऑफ उत्तराखण्ड लि0

(उत्तराखण्ड सरकार का उपक्रम)

CIN:- U40101UR2004SGC028675

मानव संसाधन एवं प्रशासनिक विभाग

विद्युत भवन, नजदीक–आई0एस0बी0टी0 क्रासिंग, सहारनपुर रोड़, माजरा, देहरादून–248002

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पत्रांक 482 /मा0सं0एवंप्र0वि0/पिटकुल/पी–5 दिनांक : 29.03.2025

कार्यालय ज्ञाप

पावर ट्रॉंन्समिशन कारपोरेशन ऑफ उत्तराखण्ड लि0 के सेवारत/सेवानिवृत्त कर्मिकों, उनके आश्रितों तथा पारिवारिक पेन्शनरों की चिकित्सा हेतु निम्नलिखित चिकित्सालय की मान्यता अवधि एतद्द्वारा निम्नानुसार बढ़ायी जाती है:–

क्र0 स0	चिकित्सालय/चिकित्सा संस्थान का नाम	मान्यता समाप्ति की अवधि	विस्तारित मान्यता अवधि	उद्देश्य
1	कैलाश हॉस्पिटल एण्ड हॉर्ट इन्सटीट्यूट, एच–33, सेक्टर–27, नोएडा	31.03.2025	01.04.2025 से 31.03.2026 तक	सभी रोगों हेतु

प्रतिबन्ध यह होगा कि : –

1. उक्त चिकित्सालय पावर ट्रॉंन्समिशन कारपोरेशन ऑफ उत्तराखण्ड लि0 के साथ हुए अनुबन्ध के अनुरूप चिकित्सालय में वर्तमान में प्रभावी चिकित्सालय दरों पर 15 प्रतिशत की छूट प्रदान करते हुये पिटकुल के सेवारत/सेवानिवृत्त कार्मिकों एवं उनके आश्रितों तथा पारिवारिक पेन्शनरों को चिकित्सा सुविधा प्रदान करेंगे।
2. चिकित्सालय द्वारा निर्धारित शर्तों की अवहेलना करने पर चिकित्सालय की मान्यता समाप्त की जा सकती है।
3. उपरोक्त के साथ ही उक्त चिकित्सालय अपने परिसर में एक साईन बोर्ड लगायेगा, जो यह दर्शायेगा –
   " पावर ट्रांसमिशन कारपोरेशन ऑफ उत्तराखण्ड लि0 के अधिकारियों/कर्मचारियों/पेंशनर्स/पारिवारिक पेंशनर्स एवं उन पर पूर्णतया आश्रित सदस्यों के लिए अधिकृत चिकित्सालय"
4. **चिकित्सालय द्वारा पावर ट्रांसमिशन कारपोरेशन ऑफ उत्तराखण्ड लि0 का एक अलग रजिस्टर रखा जायेगा, जिसमें निम्न प्रविष्टियां अनिवार्यतः अंकित की जायेंगी –**
   1. रोगी का नाम, आयु एवं लिंग
   2. यदि रोगी स्वयं कर्मचारी/अधिकारी नहीं है तो उसके पिता/पति का नाम और रोगी से सम्बन्ध। (केवल पूर्णतया आश्रित होने की स्थिति में)
   3. चिकित्सालय में भर्ती एवं डिसचार्ज की तिथि
   4. कर्मचारी का वेतनमान तथा तैनाती स्थान।
   5. रोग का विवरण।
   6. कुल प्राप्त की गयी राशि।
   7. निगम अधिकारी/कर्मचारी के हस्ताक्षर

उक्त रजिस्टर की प्रमाणित प्रतिलिपि चिकित्सालय द्वारा प्रत्येक माह के प्रथम सप्ताह में अधोहस्ताक्षरी के कार्यालय को अनिवार्य रूप से प्रेषित की जायेगी।

प्रबन्ध निदेशक

पत्रांक : 482 /मा0सं0एवंप्र0वि0/पिटकुल/पी0–5 तददिनांक :

1. निजी सचिव, प्रबन्ध निदेशक, पिटकुल, को प्रबन्ध निदेशक महोदय के संज्ञानार्थ प्रेषित।
2. निजी सचिव/डा0ए0ऑ0–निदेशक (मा0सं0)/(परिचालन)/(परियोजना)/(वित्त) पिटकुल, देहरादून को निदेशकगणों के संज्ञानार्थ प्रेषित।
3. समस्त मुख्य अभियन्ता/महाप्रबन्धक/कम्पनी सचिव/अधीक्षण अभियन्ता/उपमहाप्रबन्धक, पिटकुल .....।
4. समस्त अधिशासी अभियन्ता, पिटकुल .....।
5. अधिशासी अभियन्ता (सू0प्रौ0), पिटकुल, देहरादून को इस आशय के साथ कि वह आदेश को पिटकुल की वैबसाइट पर अपलोड करवाना सुनिश्चित करें।
6. सम्बन्धित चिकित्सालय को सूचनार्थ एवं इस आशय के साथ कि उक्त चिकित्सा बीजक में सम्बन्धित चिकित्सा प्रक्रियाओं (Procedures) के कोड का भी स्पष्ट उल्लेख करेंगे।

(अशोक कुमार जुयाल)
महाप्रबन्धक (मा0सं0)

Kailash Hospital & Heart Institute

H-33, SECTOR-27
NOIDA - 201301

NABH Accredited

NABL Accredited

World Class Facilities at Reasonable Cost
40 YEARS OF TRUST

SCHEDULE OF CHARGES w.e.f. 1st April 2025

OUR STRENGTHS	9+ Hospitals 2250+ Beds 800+ Consultant Doctors 35+ Operation Theatres 5 Cath Labs 500+ Dedicated Critical Care Beds 8000+ Committed Medical Staff
FACILITIES	Cardiology, Cardio-Thoracic Surgery Neurology, Neurosurgery Intensive Care Gastroenterology Joint Replacement Surgery Urology Neonatology Endocrinology Oncology Nephrology Ophthalmology Robotic Knee Replacement GI Surgery Internal Medicine ENT Dental Emergency Gynae & Obst. Orthopaedics Dermatology General & Laparoscopic Surgery Arthroscopy Plastic/Cosmetic Surgery Kidney Transplant Radiology & Imaging Department MRI CT Scan CT Angio USG with Color Doppler 3D Scan Digital OPG Digital Radiography with Special Investigations Image Guided Intervention Endovascular Intervention Fetal Medicine IVF(Coming Soon)

Reg. Office: A-101,
New Ashok Nagar,
Delhi-110096

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(Multi Super-Speciality Hospital)

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Phones : 0120 - 244 44 44, 246 66 66, E-mail : kailash.noida@kailashhospital.com, Website: www.kailashhealthcare.com

KailashHospitals | Kailash Healthcare | KailashHealthcare

KAILASH HEALTHCARE LTD.

VISION

"The Hospital strives to provide quality health care services through patient safety, service excellence and training programs"

MISSION

"We, at Kailash, provide health care services of international standard, at reasonable cost, by having state-of-the-art infrastructure, varied spectrum of clinical services, highly qualified and experienced professionals, dedicated staff and patient friendly culture"

QUALITY POLICY

We, at Kailash, are committed to provide
Healthcare par excellence at reasonable cost.

This would be achieved through :
Increasing the patient satisfaction level; training the manpower in the relevant disciplines; & upgradation of facilities on a regular basis.

Dr. Uma Sharma
Chairperson

IMPORTANT TELEPHONE / EXTN. NUMBERS

KAILASH HEALTHCARE LIMITED

KAILASH HOSPITAL & HEART INSTITUTE

H - 33, Sector - 27, NOIDA - 201301

Emergency Ambulance No. : 09990 444 444

HUNTING LINES : 0120- 244 44 44 & 246 66 66, 354 44 44 | FAX No.: 0120 - 2 55 23 23

Website : www.kailashhealthcare.com | E-mail : kailash.noida@kailashhospital.com

APPOINTMENT ROOM (Direct No.): 0120-2546000

EPABX TELEPHONE NUMBERS

* 2445566 * 2535455

Station	Extn.No.	Station	Extn.No.
Emergency	777	Medical Check-up Desk	828
Casualty (CMO)	553,554	Blood Bank	855
Ambulance Services	106,127	Appointment Room	789
Reception	9	Specialist OPD	877,878
MS Office	517	Cardiac OPD	880,881
Admission Desk	512	Gynae OPD	862,863
Billing	510	Physician OPD	860,861
Corporate (Marketing)	580	Corporate Help Desk	509
Laboratory	591, 593	TPA Help Desk (Insurance/Panel)	509,525,523
Radiology Deptt.	573, 576	Accounts Deptt	123,135,138
Diagnostic Billing	477	Main Gate	105

(In case you wish to reach any of the three digit numbers from outside, please dial pre-fix 2466 to the above numbers. For Example to reach Extn.No 690, please ring up 2466-690)

KAILASH HOSPITALS LTD.

23, Instt. Area, GREATER NOIDA - 201308

Emergency Ambulance No. : 09990 222 222

HUNTING LINE: 0120-232 11 11, 232 22 22, 353 33 33 & 232 77 99 | FAX No.: 0120-2 32 22 27

E-mail: kailash.gnoida@kailashhospital.com

EPABX TELEPHONE NUMBERS

* 2322223 * 2322225

Station	Extn.No.	Station	Extn.No.
Casualty	241, 243 (CMO 242)	OPD	200,220
Reception	9	Billing	254,255
MS Office	258	Blood Bank	338,339
Ambulance	334	Accounts	259, 260, 262

KAILASH INSTITUTE OF NATUROPATHY, AYURVEDA & YOGA

26, KP-1, GREATER NOIDA - 201 308

Phones : 0120- 2 32 70 00, 2 32 79 00 | Fax : 0120-2 32 22 27

Web Site : www.kailashhealthcare.com | E-mail : kinay@kailashnaturopathy.com

Station	Extn.No.	Station	Extn.No.
Reception	100,122	Chemist Shop	124
Medical Incharge	113	Administrator	113

KAILASH HOSPITAL, JEWAR

PLOT NO. 1727, TAPPAL ROAD, JEWAR

Emergency Ambulance No. : 07060255555

Phones : 05738 - 27 33 33, 35 00 00

website : www.kailashhealthcare.com | E-mail : kailash.jewar@kailashhospital.com

Station	Extn.No.	Station	Extn.No.
Reception	9	Chemist Shop	204, 205
Casualty	206,207	Billing	203
MS Office	201	Medical Incharge (CMO)	208

KAILASH HOSPITAL - KHURJA

PLOT NO.-203, WAZIDPUR, KHURJA, DISTT.-BULANDSHAHR -203131 (U.P.)

Emergency Ambulance No. : 09999998804, 9999998807, 7251000564

Fax No. : 05738 -252 333

HUNTING LINE: 05738- 355 555, 255 555 | E-mail :kailash.khurja@kailashhospital.com

Station	Extn.No.	Station	Extn.No.
Casualty	553	Billing	511, 512
Reception	224, 225, 9	Blood Bank	844
MS Office	517	Laboratory	816, 890, 891
Ambulance	105,106, 501	Accounts	520
OPD	877, 878	CMO	554
Diagnostic Billing	552	Maingate	105,106
Pharmacy	542, 543	TPA Helpdesk	610, 609
Marketing	509	Radilogy	505

IMPORTANT TELEPHONE / EXTN. NUMBERS

KAILASH HOSPITAL - DEHRADUN

MAIN HARIDWAR ROAD, JOGIWALA CHOWK, DEHRADUN, UTTARAKHAND-248001

Emergency Ambulance No. : 09999998808

Phones : 0135 -266 22 33, 266 22 44 & 266 30 00

E-mail : dehradun@kailashhospital.com

Station	Extn.No.	Station	Extn.No.
Casualty	550,551	Billing	511, 513
Reception	9	OPD	877, 878
MS Office	517	Laboratory	515, 529
Ambulance	105	Accounts	450
TPA Help Desk	525	Blood Bank	844

KAILASH HOSPITAL & NEURO INSTITUTE

NH-1 & 1A, SECTOR- 71, NOIDA - 201309

Emergency Ambulance No. : 9811223388

Phones : 0120 -248 44 44, 222 22 22 , 252 22 22

E-mail : kailash.71noida@kailashhealthcare.com

Station	Extn.No.	Station	Extn.No.
Casualty	1060,1061	Billing	1070
Reception	9	OPD	1830, 1831
Accounts	1252	Laboratory	1837
Ambulance	1072,1073	MS Office	1055

KAILASH HEALTH VILLAGE - NOIDA

C-38, SECTOR-62, NOIDA - 201301

Mobile No.-9999998801/ 02/ 03

Phones : 0120 -240 00 00

E-mail : info@healthvillage.com

Station	Extn.No.	Station	Extn.No.
Reception	601, 602	Billing	606
Accounts	610		

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HOSPITAL UPDATE

Dear Sir,

Kailash Hospital & Heart Institute (A Unit of Kailash Healthcare Ltd.) is a 325 bed multi-services and super-speciality NABH (National Accreditation Board for Hospitals and Healthcare Providers) and NABL (National Accreditation Board for Testing and Calibration Laboratories) accredited hospital. The hospital has state-of-the-art infrastructure with most advanced medical facilities and latest equipments such as MRI 1.5 Tesla 16 Channel Multiva from Philips (Netherland), Multi-slice (128) Spiral CT Scan with cardiac CT angiography facility from GE (USA), Digital computed radiography (DR System) from Samsung, Digital Mammography (Allenger), Bone Densitometry Fan, Beam technology from Fuji, ECMO (Rotaflow II, Getinge Germany), High resolution Ultrasound with Color Doppler with 3D/4D scan structures from (GE/Philips), Digital OPG system from Carestream Kodak (USA), Flat Detector Mono Plan FD20 Cathlab system - Philips (Netherland), Ventilator - Dragger (Germany), Neonatal Ventilators - Dragger (Germany), Color Doppler HD - 15 for level Two ultrasound - Philips (Netherland). Invasive Cardiac Catheterisation Laboratory, etc. The hospital is supported by over 200 specialist and super-specialist Doctors to provide the best medical care, at affordable price, round the clock.

Kailash Hospital & Neuro Institute at Sector -71, NOIDA is 200 bed and provides services in the field of Neurosurgery & Neurology (Dedicated State-of –the-art NEURO Centre First in Westurn U.P), Cardiology, Orthopaedic & Joint replacement, Gastroenterlogy & G.I.Surgery, Nephrology & Urology, Laparoscopic Surgery, Critical Care, Mother & Child Care, Neonatology & Paediatric Surgery, Plastic Surgery, Robotic, Trasplant, Fetal Medicine, Interventional Radiology, Eyes &Dental. The hospital is equiped with latest state-of-the-art equipments.

Kailash Hospital located on Sector-27 & 71 have been approved for Diplomate National Board (DNB), Courses from this year in Specialities like Internal Medicine, Obstetrics & Gynaecology, Radiology, Anaethesia & Super Specilities like Critical Care(Dr.NB) MBBS students will be trained for post graduate courses at these hospitals.

Kailash Hospital Ltd., came up in Gr.NOIDA as a first super-speciality state-of-the-art hospital with 250 beds,The hospital is the first one in the area to get accreditation by NABH. The hospital's Laboratory has also been accredited by NABL. This is the highest accreditation at national level.

Extension of Greater Noida Hospital is the Institute of Alternate Medicine called "Kailash Institute of Naturopathy, Ayurveda and Yoga" set up over a sprawling campus surrounded by lush green natural environment with pleasing ambience. The institute aims at providing treatment which is long lasting and without any side effects of antibiotics. It enjoys the back-up support of the hospital in the campus. Kailash Group's "Kailash Health Village" is NCR's Most exclusive & luxurious facility, spread over more than 40,000 sq.ft. area and is dedicated for alternative medicine & wellness in Sector - 62, Noida. Kailash Hospital Group is also running its multi speciality hospitals at Jewar, Khurja & Dehradun.

The State-of–the-art 150 bed Multi Speciality Hospital Kailash Deepak Hospital, Delhi has also been started, Ultra modern Onco Centre.

The recent spurt in cost of various inputs and overhead expenses, including those of sophisticated equipments and their maintenance, coupled with inflation, has necessitated marginal revision of our charges. Accordingly, enclosed please find our revised Schedule of Charges effective 1st April, 2025. We are still less as compared to other similar institutions.

Kailash Hospital & Heart Institute, Sector-27, Noida:

1. Dr. Vijay Ganju	Medical Superintendent	(M) 9871295311
2. Mr. P. Unnikrishnan	General Manager	(M) 9899975475
3. Mr. Surender Kumar	Group HOD Billing	(M) 9650507350

Kailash Hospital & Neuro Institute, Sector-71, Noida:

1.Dr.(Lt.Col.) Rajesh Parashar	Medical Superintendent	(M) 8107537241

Kailash Hospital, Jewar:

1. Dr. A.K. Singh	Medical Superintendent	(M) 8744013867

Kailash Hospital, Khurja :

1. Dr.(Col.) Shashi Shukla	Medical Superintendent	(M) 9873712725

Kailash Hospital, Dehradun :

1. Mr. Pawan Sharma	Director	(M) 9997776615
2. Dr. Vikas Sangwan	Medical Superintendent	(M) 8588854343

Kailash Hospital Ltd., Greater Noida :

1. Mr. Dinesh Sharma	Director	(M) 9818444430
2. Dr. Yogendra Tomar	Medical Superintendent	(M) 9871629605

Kailash Institute of Naturopathy, Ayurveda & Yoga :

1. Dr. Uma Shankar Sharma	Medical Incharge	(M) 9711918414

Kailash Health Village, Sector-62, Noida:

1. Mrs. Shashi Sharma	GM-Admin	(M) 9871550222

Kailash Deepak Hospital, Delhi :

1. Mrs.Sangeeta Goel	Director	(M) 8287990791
2. Dr. Ajeet Kumar Singh	Medical Superintendent	(M) 8393833388

Helpline :

1. Noida, Sector-27	**(M) 09990444444**
2. Noida, Sector-71	**(M) 09811223388**
3. Gr. Noida	**(M) 09990222222**
4. KINAY, Gr.Noida	**(O) 0120-2327000**
5. Khurja	**(M) 09999998804**
6. Jewar	**(M) 07060255555**
7. Dehradun	**(M) 09999998808**
8. Health Village	**(M) 09999998801**
9. Delhi	**(O) 09990333333**

Yours sincerely,

(R.N. Sharma)
Group President

From THE CHAIRPERSON'S DESK

Kailash Hospital, started the humble journey about three decades back, cruised over to international standards in the field of healthcare. We are committed to achieve patient satisfaction by providing the services, at reasonable cost, with compassionate approach. Our group hospitals have state-of-the-art infrastructure, wide spectrum of clinical services, highly qualified experienced professionals, dedicated staff and patient friendly culture with 24 x 7 emergency services in practically every field of Medicine, Surgery & Critical care.

It is our endeavour to keep abreast with latest development and advances in the field of medical science and technology. It has further helped to raise the standard in healthcare delivery system.

Advent of internet and e-mail has further facilitated the information sharing system and has narrowed the gap in application of scientific advancement elsewhere.

We look forward to your feedback and suggestions to achive greater heights in delivering healthcare services to the mankind.

With best wishes,

Dr. Uma Sharma
Group Chairperson

LIST OF EQUIPMENTS

LABORATORY:

1.	FULLY AUTOMATED ROBOTIC BIO-CHEMISTRY ANALYZER WITH TRACK	-VITROS-XT7600 (2)..... (USA)
2.	AUTOMATED IMMUNOASSAY ANALYZER	-MOGLUMI.....(USA)
3.	CARDIAC ANALYZER - CARDIAC READER	-ROCHE (H232) ..... (GERMANY)
4.	AUTOMATED ELECTROLYTE ANALYZER	-PROLYTE (2) ..... (GERMANY)
5.	AUTOMATED ABG & ELECTROLYTE ANALYZER	-ABL 800 (RADIOMETER) ..... (JAPAN)
6.	ELISA READER & WASHER	-BIORAD ..... (AUSTRIA)
7.	AUTOMATED RAPID BLOOD CULTURE ANALYZER	-BD-FX- 40 (5) ..... (USA)
8.	AUTOMATED HAEMATOLOGY CELL COUNTER	-XN- 1000 (2) ..... (JAPAN)
9.	AUTOMATED ESR ANALYZER	-VESMATIC CUBE 30 TOUCH (2) ..... (ITALY)
10.	AUTOMATED HIGH PERFORMANCE LIQUID CHROMATOGRAPHY ANALYZER	-BIORAD D-10 (2) ..... (USA)
11.	MICROTOME	-LEICA (1) ..... (INDIA)
12.	AUTOMATED TISSUE PROCESSOR	-VTP (300)- UNIMEDITREK ..... (INDIA)
13.	AUTOMATED URINE ANALYZER	-CLINITEK ADVANTUS ..... (USA)
14.	AUTOMATED COAGULATION ANALYZER	-ACL ELITE 300 TOUCH ..... (USA)
15.	AUTOMATED PCR SYSTEM	-CFXCONNECT.(BIORAD)..... ..... (USA)
16.	AUTOMATED PCR SYSTEM	- ROTOR GENE (QIAGEN)..... ..... (USA)
17.	AUTOMATED CULTURE & IDENTIFICATION SYSTEM	-VITEK-2 (BIOMERIEUX)..... ..... (USA)
18.	AUTOMATED CHEMILUMINESCENCE IMMUNOASSAY ANALYZER	-DIASORIN (LIASON) ..... (ITALY)
19.	AUTOMATED ABG & ELECTROLYTE ANALYZER	-RAPID LAB 1265 (SIEMENS) (2) ..... (JAPAN)
20.	OSMOMETER	-GLOBAL ..... (GERMANY)
21.	FILM ARRAY TORCH SYSTEM -BIOFIRE	-BIOMERIUX ..... (USA)
22.	GEL ELECTROPHORESIS	-SUYOG ..... (GERMANY)
23.	ELISA READER	-BIORAD ..... (USA)
24.	GENEXPERT	-CEPHEID ..... (GERMANY)
25.	NAT ANALYZER MACHINE	-ROCHE DIAGNOSIS ..... (UK)

RADIO-DIAGNOSIS:

1.	M.R.I. -1.5 TESLA	- AMBITION X, 1.5T, PHILIPS ..... (NETHERLAND)
2.	CT REVOLUTION 128 SCLICE GE	- GE HEALTHCARE ..... (USA)
3.	ULTRASOUND WITH COLOUR DOPPLER WITH 3D PROBE	- PHILIPS - AFFINITI-50 & 70 ..... (USA)
4.	SAMSUNG HS70 ULTRASOUND	- ACUSON NX-3 ..... (GERMANY)
5.	GE PORTABLE ULTRASOUND MACHINE	- VERSANA ACTIVE ..... (USA)
6.	ULTRASOUND MACHINE	- SAMSUNG- HS-70 ..... (JAPAN)
7.	DIGITAL X-RAY SYSTEM	- SIEMENS ..... (GERMANY)
8.	DIGITAL MAMMOGRAPHY	- ALLENGERS ..... (INDIA)
9.	WHOLE BODY BONE DENSITOMETRY SYSTEM	- FUJIFILM ..... (JAPAN)
10.	DIGITAL O.P.G.	- UNICON, DENMART ..... (KOREAN)
11.	ULTRASOUND MACHINE- HS70	- SAMSUNG ..... (JAPAN)

FETAL MEDICINE:

1.	G E ULTRASOUND (3D/4D)	- VOLUSON E6-BT19 ..... (USA)
2.	G E ULTRASOUND (3D/4D)	-VOLUSON E6-BT21 ..... (USA)

EYE INSTRUMENTS:

1.	AUTO REFRACTOMETER (2)	- NIKON .....(JAPAN)
2.	OPERATING MICROSCOPE (1)	- ZEISS ..... (GERMANY)
3.	PHACO EMULSIFICATION (1)	- ALCON .....(USA)
4.	SLIT LAMP (2)	
5.	KERATOMETER (2)	
6.	AUTOMATIC VISUAL FIELD ANALYZER	-ZEISS ..... (GERMANY)
7.	A SCAN BIOMETER	-BIOMEDIUX.....(USA)
8.	NCT NOT CONTACT TONOMETER	-TOPCON .....(1) ..... (JAPAN)
9.	PERIMETRI (HFA)	-ZEISS ..... (GERMANY)

INTENSIVE CARE UNIT:

1.	VENTILATOR (for Neonatus, Paediatric & Adult)	- 6 NOS. SERVO S - MAQUET (4) ..... (GERMANY)
		- 15 NOS. SERVO-S ..... (GERMANY)
		- 15 NOS. SERVO-I ..... (GERMANY)
		- 2 NOS. SERVO ' i ' MAQUET (2) ..... (GERMANY)
		-6 NOS. SAVINA DRAGER (6) ..... (GERMANY)
		- 1 NO. EVITA 4 DRAGER -5 (3) ..... (GERMANY)
		- 3 NOS. EVITA 2 DURA, DRAGER-2 ..... (GERMANY)
		- BIRD (AVIAN) ..... (USA)
2.	DEDICATED NEONATAL VENTILATOR	- 2 NOS. BABY LOG (DRAGER) ..... (GERMANY)
		- 1 NO. EVITA-4 NEO FLOW ..... (GERMANY)
		- 1 NO. SERVO I NEO MAQUET ..... (GERMANY)
3.	TRANSPORT VENTILATOR	- 1 NO. DRAEGER OXYLOG ..... (GERMANY)
4.	SLE-5000 (HFO VENTILATOR)	- 1 NO. GE HEALTHCARE ..... (USA)
5.	VENTILATOR (VN600, HFO)	- 1 NO. DRAGGER ..... (GERMANY)

6.	DEFIBRILLATOR	- 3 NOS. PHILIPS.....(USA) - 11 NOS BPL LTD., MINDRAY
7.	CARDIO TOCO GRAPH (3 Nos.)	- BPL (2000) - PHILIPS .....(USA)
8.	VEDIO EEG MACHINE	- MEDICAID (1)
9.	BIPAP	- RESPRONICS - (6 Nos.) .....(USA) - HOFFRICHTER - (3 Nos.) .....(GERMANY)
10.	ADVANCE ENDOSCOPIC SYSTEM	- OLYMPUS (1).....(JAPAN)
11.	RADIO FREQUENCY MACHINE	- ELLMAN .....(USA)
12.	LARYNGO RHINO FIBRESCOPE	- OLYMPUS (1).....(JAPAN)
13.	CAPSULE ENDOSCOPY	- MEDTRONIC .....(USA)
14.	ECMO MACHINE	- ROTA FLOW - II .....(GERMANY)
15.	FIBRO SCAN	- FIBRO TOUCH .....(GERMANY)
16.	PHONOMETER SYSTEM	- .....(GERMANY)
17.	E.U.S. (ENDOSCOPY ULTRASOUND SYSTEM)	- OLYMPUS .....(JAPAN)

PHYSIOTHERAPY:

1.	LASER	- PHYACTION 740 .....(NETHERLANDS)
2.	I.L.T. (INTERMITTENT LUMBAR TRACTION WITH BED)	
3.	I.C.T. (INTERMITTENT CERVICAL TRACTION)	
4.	QUADRICEPS CHAIR	
5.	MULTIPURPOSE EXS. CHAIR	
6.	PARALLEL WALKING BAR 4 NOS. U/S THERAPY - NEW INTERNATIONAL ELECTRO	
7.	HOT PACKS	- CHATTANOOGA .....(U.S.A.)
8.	TENS / I.F.T.	- DIGITAL NMS - 498 .....(INDIA)
9.	COMBINATION THERAPY	
10.	HAND EXERCISER	

CARDIOLOGY: INVASIVE

1.	CARDIAC CATHETERISATION LAB WITH ACCESSORIES	- AZURION 7C-20, PHILIPS .....(NETHERLAND)
2.	INTRA-AORTIC BALLOON PUMP	- CS-300 (2 NOS.), CS-300, ARROW .....(USA)
3.	ANAESTHESIA MACHINE-DRAGER, GE MINDRAY	- 05 Nos. .....(USA)
4.	PACEMAKER (PSA) SINGLE & DUAL CHAMBER - Dual Chamber - (One NO.) - SINGLE CHAMBER - (3 NO.S)	 - PACE MEDICAL INC, (2) .....(USA) - PACE MEDICAL INC, Meditronics (1) .....(USA) (65 Nos. Terumo, AGILIA -132
5.	INFUSION PUMPS, SYRINGE PUMP	- FRISENUS, MINDRAY .....(USA)

CARDIOLOGY: NON-INVASIVE

1.	E.C.G.	- MINDRAY, GE HEALTHCARE, PHILIPS .....(USA/GERMANY) & PHILIPS (1Nos.)
2.	COLOR DOPPLER COLOR DOPPLER WITH TEE	- IE-33 PHILIPS.....(USA) CX-50 PHILIPS .....(USA)
3.	T.M.T.	- MORTARA-X-SCRIBE-II (2 NOS.) .....(USA)
4.	HOLTER WITH ANALYSER	- ZYMED 1810, PHILIPS .....(USA)
5.	P.F.T. -	- SPIRO 232 MORGON .....(U.K.) - P.K. MORGON MIR (2 NOS.).....(USA)
6.	P.F.T. (DIFFUSION SYSTEM)	- SCHILLER MEDICAL.....(USA)
7.	ECHO MACHINE (EPIC- CVX)	- PHILIPS .....(NETHERLAND)

C.S.S.D

1.	ETO STERLIZER	- PCI, MACHINE FABRIC
2.	STEAM STERLIZER-3	- 03 NOS. YORCO, CASTLE (GETINGE), NATT STEAL
3.	WASHER DIS. - 1	- 01 NO. GETINGE

C.T.V.S.

1.	CARDIAC O.T. LIGHT	- MINDRAY .....(USA)
2.	HEART LUNG MACHINE	- GETINGE JOSTRA (2 Nos.) .....(GERMANY)
3.	ELECTRO SURGICAL UNIT (3 NOS.)	- MEDTRONIC & ERBE .....(USA)

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1. GASTRO INTESTINAL STAPLERS.

NON-MEDICAL EQUIPMENT:

1. 18 AMBULANCES
2. POWER CONNECTION 1250X2 K.V.A./ 990 K.V.A/
3. GENERATOR BACKUP - 4 SETS
   1. 750 K.V.A. **2.** 625 K.V.A. **3.** 1010 K.V.A. **4.** 1250 K.V.A.
4. LIQUIFIED OXYGEN TANK
5. 5 ELEVATORS - OTIS
6. CENTRALLY AIR-CONDITIONED

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C.T.V.S.-ICU	16000.00	
CCU	16000.00	
CTVS Step down	14000.00	
CCU Step down	14000.00	
Medical ICU	16000.00	
Neuro ICU	16000.00	
BURN UNIT (Each bed)	14000.00	
HDU ICU	14000.00	
HDU Single Room	14000.00	
HDU Sharing Room	13000.00	
Gynae Sharing Room	9500.00	
Paed Care Unit	4500.00	
PICU	11900.00	
PICU Step down	9000.00	
Nursery	6500.00	
Neonatal ICU	9500.00	
CASUALTY - (Short Admission More than 2 to 4 Hrs.) - (Short Admission Less than 2 Hrs.)	2000.00 1250.00	
Spl.Economy (Four Bedded)	5500.00	
Economy	4000.00	
DAY CARE (Upto 8 Hrs.)	3100.00	

❋ ***Note : Each Room has facilities of Intercom, LCD, Hot Water & Toilet*** ❋

OPD CHARGES:

MD	:	1200.00	-- First Visit (Valid for five days).
	:	1150.00	-- For each of Second to Fourth Visit within 30 days.
DM & M.Ch.	:	1500.00	-- First Visit (Valid for five days).
	:	1450.00	-- For each of Second to Fourth Visit within 30 days.
* HOD / Director	:	1500.00 to 2500.00	-- Valid for five days
SR.RESIDENT/MEDICAL OFFICER	:	850.00	-- For each Visit
CMO	:	500.00	-- For each Visit
PHYSIOTHERAPY CONSULTATION	:	650.00	-- For each Visit (OPD)
DIETICIAN	:	650.00	-- For each Visit (OPD)

IPD Dietician Consultation shall be charged each patients Rs. 150/- day upto a max capping of Rs. 600/- in a weak (except Dialysis, Endoscopy & Daycare patients).

** Condition Apply*

INDOOR CHARGES:

Only two visits per day are payable to consultant per speciality. In case of very sick patient or on patient's demand extra visit will be charged.

DAY EMERGENCY (6A.M. to 11 P.M.) 25% Extra when called from home for first 45 Minutes & Normal Consultation Fee for each subsequent 30 mins. of stay or part thereof.

NIGHT EMERGENCY (11P.M. to 6 A.M.) 100% Extra when called from home for the first 45 Min. & Normal Consultation Fee for each subsequent 30 Min. of stay or part thereof.

LABOUR ROOM CHARGES 25% of Obstetrician Charges.

PAEDIATRICIAN CHARGES 25% of Obstetrician Charges. Extra charge in sick new born after three days of birth.

O.T. Charges	**-**	**90% of Surgeon Fees.**
Minor O.T./Bedside procedure charges	**-**	**20% of Surgeon fees.**
Anaesthesiologist Fee	**-**	**30% of Surgeon Fee.**

Standby
* Consultant in O.T. 20% of Surgeon Fee.
* Asstt. Surgeon Charges 25% of Surgeon Fee.
* Surgeon's Fee will increase by 20% in case of Emergency Surgery performed during 11 PM to 6 AM provided the Surgeon justifies, in writing, the reason for performing the surgery during this period.

Pre-Anaesthesia Check-up (PAC) Charges will be as per IPD Consultation for admitted patients & OPD Consultation for OPD Patients.

IPD CHARGES

WARD	NURSING CHARGES PER DAY	RMO Per Visit	MD Per Visit	DM/MCh Per Visit
Economy	490.00	530.00	900.00	1100.00
Spl. Economy (Four Bedded)	490.00	530.00	900.00	1100.00
Semi Private	490.00	530.00	1050.00	1400.00
Private	600.00	660.00	1250.00	1500.00
Deluxe	680.00	740.00	1300.00	1600.00
Suites	800.00	880.00	1500.00	1900.00
ICU/CCU	900.00	990.00	1300.00	1600.00
Nursery	900.00	990.00	1300.00	1600.00
Paed Care Unit	490.00	530.00	900.00	1100.00
PICU	900.00	990.00	1300.00	1600.00
Neonatal ICU	900.00	990.00	1300.00	1600.00
Casualty	490.00	530.00	1200.00	1500.00

NOTE:- CHECK OUT TIME IS 11:00 A.M.

HEALTH CHECK-UP PACKAGES

GENERAL HEALTH CHECK-UP PACKAGES

KM25-0001 ***GENERAL HEALTH CHECK-UP*** **(Rs. 1,800/-)**

- History & Physical Examination
- HB, TLC, DLC, RBC, PCV, MCV, MCH, MCHC, PLATELET, ESR
- Blood Grouping Rh. Typing
- Blood Sugar (Random)
- Serum Cholesterol
- Urine R/E & Stool R/E
- X- Ray Chest - PA View
- ECG (Resting)
- Eye Screening

Doctor Consultation.

ADVANCE HEALTH CHECK-UP PACKAGES

KM25-0002 ***WELL WOMEN'S HEALTH CHECK-UP*** **(Rs. 5,200/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (F)
- Blood Sugar (PP)
- Urine Routine & Microscopic
- Serum Creatanine
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- PAP Smear (For Women)
- X-ray Chest P.A. View
- ECG (Resting)
- Ultrasound Whole Abdomen
- Mammography
- Diet Counseling

Final Report & Assessment by Gynaecologist / Physician

KM25-0003 ***EXTENDED WELL WOMEN'S HEALTH CHECK-UP*** **(Rs. 6,900/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (F)
- Blood Sugar (PP)
- Urine R/E
- Liver Profile
- Lipid Profile
- Urea (Blood)
- Uric Acid
- Serum Creatanine
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- PAP Smear (For Women)
- ECG (Resting)
- X-ray Chest P.A. View
- Ultrasound Whole Abdomen
- Mammography
- Dental Screening
- Eye Screening
- Diet Counseling

Final Report & Assessment by Gynaecologist/Physician

KM25-0004 ***EXECUTIVE ROUTINE CHECK-UP*** **(Rs. 3,000/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (F)
- Blood Grouping Rh. Typing
- Liver Function Test (LFT)
- Urine Routine & Microscopic
- Lipid Profile
- Blood Urea
- Serum Creatanine
- Serum Uric Acid
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- ECG (Resting)
- X-Ray Chest P.A. View
- Eye Screening
- Diet Counseling

Doctor Consultation

KM25-0005 ***KHRC EXECUTIVE CHECK-UP-(I)*** **(Rs. 4,000/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting & PP)
- Urine R/E
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- ECG (Resting)
- X-ray Chest P.A. View
- Ultrasound Whole Abdomen
- Eye Check-up (Screening)
- Diet Counseling

Doctor Consultation

KM25-0006 ***KHRC EXECUTIVE CHECK-UP – (II)*** **(Rs. 6,300/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting & PP)
- Urine R/E
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- Glycosylated Haemoglobin (Hb A1c)
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- TMT (Tread Mill Test)
- ECG (Resting)
- X-ray Chest P.A. View
- Ultrasound Whole Abdomen
- Eye Check-up (Screening)
- Dental Screening
- Diet Counseling

Doctor Consultation.

KM25-0007 ***KHRC EXECUTIVE CHECK-UP - (III)*** **(Rs. 9,300/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting & PP)
- Urine R/E
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- Thyroid Profile : T3, T4, TSH
- PSA (For Men) / Pap Smear (Female)
- Glycosylated Haemoglobin (Hb A1c)
- RA-Factor
- ECG (Resting)
- TMT (Thyroid Stimulating Hormone) Utrasensitive
- Echo Color Doppler
- X-ray Chest P.A. View
- Ultrasound Whole Abdomen
- Pulmonary Function Test (PFT)
- Eye Check-up
- Dental Screening
- Diet Counseling

Final Report & Assessment by Gynaecologist / Physician

KM25-0008 ***COMPREHENSIVE WELL WOMENS CHECK-UP (IV)*** **(Rs. 9,900/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting & PP)
- Urine R/E
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- Thyroid Profile : T3, T4, TSH
- PAP Smear (For Women)
- Glycosylated Haemoglobin (Hb A1c)
- RA-Factor
- ECG (Resting)
- ECHO Color Doppler
- X-ray Chest P.A. View
- Pulmonary Function Test (PFT)
- Ultrasound Whole Abdomen
- Mammography
- Eye Check-up
- Dental Screening
- Diet Counseling

Final Report & Assessment by Gynaecologist / Physician

KM25-0009 ***PREMIUM HEART PACKAGE*** **(Rs. 7,500/-)**

- History & Physical Examination
- Complete Blood Count
- Blood Sugar (Fasting & PP)
- Urine Routine
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- Glycosylated Haemoglobin (Hb A1c)
- ECG (Resting)
- TMT (Tread Mill Test)
- Echo Color Doppler
- X-ray Chest P.A. View
- Ultrasound Whole Abdomen
- Diet Counseling

Doctor Consultation.

KM25-0010 ***ROUTINE HEART CHECK-UP*** **(Rs. 5,100/-)**

- History & Physical Examination
- Complete Blood Count
- Blood Sugar (Fasting & PP)
- Lipid Profile
- Kidney Function Test (KFT)
- SGPT
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- ECG (Resting)
- TMT (Tread Mill Test)
- ECHO Color Doppler
- X-ray Chest P.A. View
- Diet Counseling

Doctor Consultation

KM25-0011 ***EXECUTIVE HEART PACKAGE*** **(Rs. 6,000/-)**

- History & Physical Examination
- Complete Blood Count
- Blood Sugar (Fasting & PP)
- Urine Routine
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- Glycosylated Haemoglobin (Hb A1c)
- ECG (Resting)
- Echo Color Doppler
- X-ray Chest P.A. View
- Ultrasound Whole Abdomen
- Diet Counseling

Final Report Assessment by Cardiologist / Physician

KM25-0012 ***EXHAUSTIVE WHOLE BODY CHECK UP (MALE)*** **(Rs. 13,800/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting & PP)
- Blood Grouping & Rh. Typing
- Urine R/E & Stool R/E
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- Thyroid Profile : T3, T4, TSH
- Vitamin D3 (25 Hydroxy)
- Vitamin B12
- IRON + TIBC (IRON/TIBC)
- CT Scan (Head Plain)
- PSA (For Men)
- Glycosylated Haemoglobin (Hb A1c)
- RA-Factor
- ECG (Resting)
- TMT (Tread Mill Test)
- Echo Color Doppler
- X-ray Chest P.A. View
- X-ray Cervical AP/ LAT View
- Ultrasound Whole Abdomen
- Pulmonary Function Test (PFT)
- Eye Check-up
- Dental Screening
- Diet Counseling

Final Report Assessment by Cardiologist / Physician

KM25-0013 ***EXHAUSTIVE WHOLE BODY CHECK UP (FEMALE)*** **(Rs. 14,800/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting & PP)
- Blood Grouping & Rh. Typing
- Urine R/E & Stool R/E
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- Thyroid Profile : T3, T4, TSH
- Vitamin D3 (25 Hydroxy)
- Vitamin B12
- IRON + TIBC (IRON/TIBC)
- CT Scan (Head Plain)
- PAP Smear (For Women)
- Glycosylated Haemoglobin (Hb A1c)
- RA-Factor
- ECG (Resting)
- Echo Color Doppler
- X-ray Chest P.A. View
- X-ray Cervical AP/ LAT View
- Ultrasound Whole Abdomen
- Pulmonary Function Test (PFT)
- Mammography
- Eye Check-up
- Dental Screening
- Diet Counseling

Final Report Assessment by Physician/ Cardiologist / Gynaecologist Consultation

KM25-0014 ***EXHAUSTIVE WHOLE BODY CHECK-UP WITHOUT CT (MALE)*** **(Rs. 12,200/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting & PP)
- Blood Grouping & Rh. Typing
- Urine R/E & Stool R/E
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- Thyroid Profile : T3, T4, TSH
- Vitamin D3 (25 Hydroxy)
- Vitamin B12
- IRON + TIBC (IRON/TIBC)
- PSA (For Men)
- Glycosylated Haemoglobin (Hb A1c)
- RA-Factor
- ECG (Resting)
- TMT (Tread Mill Test)
- Echo Color Doppler
- X-ray Chest P.A. View
- X-ray Cervical AP/ LAT View
- Ultrasound Whole Abdomen
- Pulmonary Function Test (PFT)
- Eye Check-up
- Dental Screening
- Diet Counseling

Doctor Consultation

KM25-0015 ***EXHAUSTIVE WHOLE BODY CHECK-UP WITHOUT CT (FEMALE)*** **(Rs. 13,000/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting & PP)
- Blood Grouping & Rh. Typing
- Urine R/E & Stool R/E
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- Thyroid Profile : T3, T4, TSH
- Vitamin D3 (25 Hydroxy)
- Vitamin B12
- IIRON + TIBC (IRON/TIBC)
- PAP Smear (For Women)
- Glycosylated Haemoglobin (Hb A1c)
- RA-Factor
- ECG (Resting)
- Echo Color Doppler
- X-ray Chest P.A. View
- X-ray Cervical AP/ LAT View
- Ultrasound Whole Abdomen
- Pulmonary Function Test (PFT)
- Mammography
- Eye Check-up
- Dental Screening
- Diet Counseling

Doctor Consultation & Gynaecologist Consultation

KM25-0016 ***STANDARD GOLD PACKAGE (MALE)*** **(Rs. 9,200/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting)
- Glycosylated Haemoglobin (Hb A1c)
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- PSA (For Men)
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- Urine R/E
- Vitamin D3 (25 Hydroxy)
- Vitamin B12
- ECG (Resting)
- TMT (Tread Mill Test)
- Echo Color Doppler
- Ultrasound Whole Abdomen
- X-ray Chest P.A. View

Final Report Assessment by Cardiologist / Physician

KM25-0017 ***STANDARD GOLD PACKAGE (FEMALE)*** **(Rs. 9,700/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- Blood Sugar (Fasting)
- Glycosylated Haemoglobin (Hb A1c)
- Liver Profile
- Lipid Profile
- Kidney Function Test (KFT)
- PAP Smear
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- Urine R/E
- Vitamin D3 (25 Hydroxy)
- Vitamin B12
- ECG (Resting)
- Echo Color Doppler
- Ultrasound Whole Abdomen
- Mammography
- X-ray Chest P.A. View

Final Report Assessment by Cardiologist / Gynaecologist/ Physician

KM25-0018 **Fan Beam Bone Densitometery (II side)** **(Rs. 2,700/-)**

KM25-0019 **Fan Beam Bone Densitometery (III side)** **(Rs. 3,700/-)**

KM25-0020 **Fan Beam Dexa for Whole Body Fat Analysis** **(Rs. 3,300/-)**

KM25-0021 **Fan Beam Dexa Whole Body Scan** **(Rs. 4,200/-)**

SPECIAL HEALTH CHECK-UP PACKAGES

KM25-0022 ***DIABETIC CHECK-UP*** **(Rs. 3,500/-)**

- History & Physical Examination
- Blood Sugar (F) & Blood Sugar (PP)
- Urine Sugar (F) & Urine Sugar (PP)
- Glycosylated Haemoglobin (Hb A1c)
- Micro Albumin Urine
- **HEART PROFILE**

  LIPID PROFILE – Cholesterol, Triglycerides, HDL, LDL, VLDL,
  (Chol+HDL Ratio) LDL+VLDL Ratio
- Blood Urea
- Serum Creatinine
- ECG (Resting)
- Eye Consultation

Final Report Assessment by Endocrinologist/ Physician

KM25-0023 ***ASTHMA ASSESSMENT CHECK-UP*** **(Rs. 3,000/-)**

- History & Physical Examination
- Complete Blood Count, ESR
- IGE
- Urine R/E
- X-Ray Chest P.A. View
- X-Ray P.N.S.
- Pulmonary Function Test (PFT)

Final Report Assessment by Chest Physician

HOME HEALTH CHECK-UP PACKAGES

KM25-0024 ***HOME HEALTH CHECK-UP - I*** **(Rs. 2,500/-)**

- Complete Blood Count (CBC) & ESR
- Blood Sugar (F)
- Urine Routine
- Liver Profile
- Lipid Profile
- Urea
- Uric Acid
- Creatanine
- TSH (Thyroid Stimulating Hormone) Utrasensitive

Doctor Consultation

KM25-0025 ***HOME HEALTH CHECK-UP - II*** **(Rs. 4,100/-)**

- Complete Blood Count (CBC) & ESR
- Blood Sugar (F) & PP
- Urine Routine
- Liver Profile
- Lipid Profile
- Kidney Function Test
- Thyroid Profile : T3, T4 & TSH
- PSA (For Men)
- Glycosylated Haemoglobin (Hb A1c)
- RA Factor

Doctor Consultation

For Female : Excluding PSA in package No.-II Rs. 3,600/-

KM25-0026 ***HOME HEALTH CHECK-UP - III*** **(Rs. 6,200/-)**

- Complete Blood Count (CBC) & ESR
- Blood Sugar (F) & PP
- Urine Routine
- Liver Profile
- Lipid Profile
- Kidney Function Test
- Thyroid Profile : T3, T4 & TSH
- IRON + TIBC (IRON/TIBC)
- Vitamin D3
- Vitamin B-12
- PSA (For Men)
- Glycosylated Haemoglobin (Hb A1c)
- RA Factor

Doctor Consultation

For Female : Excluding PSA in package No.-III Rs. 5,600/-

NOTE:

- ♦ The packages are already discounted. Hence no further discount is applicable.
- ♦ TMT only in Female Advance Health Check-up packages Rs. 1,200/-
- ♦ ECHO in place of TMT at Doctor's advice Rs. 600/-
- ♦ In case any further Consultation/Investigation is required after the check up, the same will be done at 20% discount.
- ♦ CT Scan will be done only after Doctor's Consultation & Recommendation.

BONE HEALTH CHECK-UP PACKAGES

KM25-0027 ***BONE HEALTH PACKAGE*** **(Rs. 6,100/-)**

- History & Physical Examination
- Complete Blood Count
- Blood Sugar (Fasting) / Blood Sugar (Random)
- TSH (Thyroid Stimulating Hormone) Utrasensitive
- S. Calcium
- S. Phosphorus
- Alkaline Phosphatase
- Vitamin B12
- Vitamin D3
- Bone Densitometry (Two Sides)
- X-ray DL Spine AP & LAT / X-ray LS Spine AP & LAT
- X-ray Both Knee AP & LAT

Final Report Assessment by Orthopaedics / Physician

CANCER SCREENING PACKAGES

KM25-0028 ***CANCER SCREENING PACKAGE (MALE)*** **(Rs. 5,500/-)**

- History & Physical Examination
- Complete Blood Count (CBC)
- Peripheral Smear (PS)
- CEA
- AFP
- CA19.9
- Stool Occult Blood
- PSA Total
- X-Ray Chest P.A. View
- Ultrasound Whole Abdomen

Final Report & Assessment by Physician/Oncologist

KM25-0029 ***CANCER SCREENING PACKAGE (FEMALE)*** **(Rs. 9,550/-)**

- History & Physical Examination
- Complete Blood Count (CBC)
- Peripheral Smear (PS)
- CEA
- AFP
- CA19.9
- CA125
- CA15.3 Breast Cancer Marker
- PAP Smear / LBC (Liquied Based Cytology)
- HPV PCR High Risk Screening
- Stool Occult Blood
- X-Ray Chest P.A. View
- Mammography
- Ultrasound Whole Abdomen

Final Report & Assessment by Gynaecologist/Physician/Oncologist

KM25-0030 ***CERVICAL CANCER SCREENING*** **(Rs. 3,000/-)**

- History & Physical Examination
- Complete Blood Count (CBC)
- LBC (Liquied Based Cytology)
- HPV PCR High Risk Screening
- Ultrasound TVS

Final Report & Assessment by Gynaecologist

Add on Tests (Applicable for all packages)

KM25-0031 **Cancer Screening (Male)** **(Rs. 2,100/-)**

- CEA
- Stool for Occult Blood
- CA19.09

KM25-0032 **Cancer Screening (Female)** **(Rs. 4,100/-)**

- CEA
- CA19.9
- CA - 125
- Stool for Occult Blood
- CA15.3 Breast Cancer Marker

ADD ON TESTS :

- Vitamin D3 (25 Hydroxy) & Vitamin B12 : 2,000/-
- Stool Routine : 150/-
- Blood Grouping & Rh. Typing : 150/-
- HPV PCR High Risk Screening : 1,200/-

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0001	ABG, ARTERIAL BLOOD GAS	1310	1530	1840
KL25-0002	ABG, ARTERIAL BLOOD GAS WITH ELECTROLYTES	1310	1530	1840
KL25-0003	ABG, VENOUS BLOOD GAS	1310	1530	1840
KL25-0004	ABG, VENOUS BLOOD GAS WITH ELECTROLYTES	1310	1530	1840
KL25-0005	ABSOLUTE BASOPHIL COUNT	330	390	470
KL25-0006	ABSOLUTE EOSINOPHIL COUNT	330	390	470
KL25-0007	ABSOLUTE GRANULOCYTE COUNT	330	390	470
KL25-0008	ABSOLUTE LYMPHOCYTE COUNT	330	390	470
KL25-0009	ABSOLUTE MONOCYTE COUNT	330	390	470
KL25-0010	ABSOLUTE NEUTROPHIL COUNT	330	390	470
KL25-0011	ADENOSINE DEAMINASE (ADA) FROM BLOOD	1250	1470	1770
KL25-0012	ADENOSINE DEAMINASE, ADA FROM BODY FLUID	1250	1470	1770
KL25-0013	AFB IDENTIFICATION (RAPID TB Ag)	1650	1940	2330
KL25-0014	AFB STAIN	550	640	770
KL25-0015	ALBERTS STAIN FOR DIPHTHERIA	610	710	850
KL25-0016	ALBUMIN	260	310	370
KL25-0017	ALBUMIN FLUID	260	310	370
KL25-0018	ALBUMIN, URINE (STRIP METHOD) QUALITATIVE	210	250	300
KL25-0019	ALKALINE PHOSPHATE	280	330	390
KL25-0020	ALPHA - FETOPROTEIN, AFP, CANCER MARKER	1490	1750	2100
KL25-0021	ALPHA - FETOPROTEN, AFP, MATERNAL SCREENING	1490	1750	2100
KL25-0022	ALPHA -FETO PROTEIN, FLUID	1500	1760	2130
KL25-0023	AMMONIA, BLOOD	1910	2250	2700
KL25-0024	AMOEBIC SEROLOGY	1650	1940	2330
KL25-0025	AMYLASE	910	1070	1280
KL25-0026	AMYLASE, 24 HRS. URINE	910	1070	1280
KL25-0027	AMYLASE, FLUID	910	1070	1280
KL25-0028	AMYLASE, URINE	910	1070	1280
KL25-0029	ANCA - P	2200	2590	3110
KL25-0030	ANCA-C	2200	2590	3110
KL25-0031	ANGIOTENSION CONVERTING ENZYME	1320	1550	1860
KL25-0032	ANTI A TITRE	800	930	1100
KL25-0033	ANTI B TITRE	800	930	1100
KL25-0034	ANTI CARDIOLIPIN ANTIBODY (IGG)	1410	1660	1990
KL25-0035	ANTI CARDIOLIPIN ANTIBODY (IGM)	1410	1660	1990
KL25-0036	ANTI CYCLIC CITRULLINATED PEPTIDE	2580	3040	3650
KL25-0037	ANTI DNA-DS (EIA)	1810	2120	2550
KL25-0038	ANTI MICROSOMAL/PEROXIDASE ANTIBODY ANTI TPO (TMA)	1850	2180	2610
KL25-0039	ANTI MULLARIAN HARMONE (AMH)	2560	3010	3610
KL25-0040	ANTI NUCLEAR ANTIBODY (ANA)	1200	1400	1680
KL25-0041	ANTI NUCLEAR ANTIOBODY (LIA)	5390	6330	7600
KL25-0042	ANTI PHOSPHOLIPID ANTIBODY IGG	1340	1580	1900
KL25-0043	ANTI PHOSPHOLIPID ANTIBODY IGM	1340	1580	1900
KL25-0044	ANTIBODY TITRE (INDIRECT COOMB TEST)	1080	1280	1530

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0045	APOLIPOPROTEIN [AP0 A-1 & B]	1340	1580	1900
KL25-0046	APT TEST (STOOL)	630	740	890
KL25-0047	ASCITIC FLUID FOR AFB	550	640	770
KL25-0048	ASCITIC FLUID FOR FUNGAL STAIN	550	640	770
KL25-0049	ASCITIC FLUID FOR GRAM STAIN	550	640	770
KL25-0050	ASO TITRE, QUANTITATIVE	1050	1230	1480
KL25-0051	BACTERIAL MENINGITIS SCREEN	4500	5290	6350
KL25-0052	BAL FOR AFB	550	640	770
KL25-0053	BAL FOR FUNGAL STAIN	550	640	770
KL25-0054	BAL FOR GRAM STAIN	550	640	770
KL25-0055	BENCE JONES PROTEIN (URINE)	910	1070	1280
KL25-0056	BETA 2 GLYCOPROTEIN IgG	1370	1610	1930
KL25-0057	BETA 2 GLYCOPROTEIN IgM	1370	1610	1930
KL25-0058	BETA HCG, MATERNAL SCREENING	1320	1540	1860
KL25-0059	BETA HUMAN CHORIONIC GONADOTROPIN [BHCG]	1320	1540	1860
KL25-0060	BETA HUMAN CHORIONIC GONADOTROPIN [BHCG]-FLUID	1320	1540	1860
KL25-0061	BICARBONATE (HCO3) BY ABG	1440	1680	2020
KL25-0062	BICAROBONATE, SERUM	1440	1680	2020
KL25-0063	BILE ACID	1650	1940	2330
KL25-0064	BILE PIGMENT (B.P.)	190	220	260
KL25-0065	BILE SALT (B.S.)	190	220	260
KL25-0066	BILIRUBIN (FLUID)	480	570	680
KL25-0067	BILIRUBIN, TOTAL (T+D+I)	470	560	670
KL25-0068	BIOCHEMISTRY & CYTOLOGY MISC, FLUID (SUGAR & PROTEIN)	1200	1410	1690
KL25-0069	BIOFIRE BLOOD CULTURE IDENTIFICATION	18190	21400	25680
KL25-0070	BIOFIRE BONE AND JOINT PANEL	18190	21400	25680
KL25-0071	BIOFIRE GI (GASTROINTESTINAL)PANEL, STOOL	18190	21400	25680
KL25-0072	BIOFIRE ME (MENINGOENCEPHALITIS PANEL) CSF	18190	21400	25680
KL25-0073	BIOFIRE, PNEUMOINIA PLUS PANEL	18190	21400	25680
KL25-0074	BIOFIRE, RESPIRATORY PATHOGEN PANEL	18190	21400	25680
KL25-0075	BIOPSY (HISTOPATH.) SPECIMEN FROM RADICAL SURGERY	4380	5150	6180
KL25-0076	BIOPSY LARGE (HISTOPATHOLOGY, LARGE SPECIMEN)	3170	3730	4470
KL25-0077	BIOPSY MEDIUM (HISTOPATHOLOGY, MEDIUM SPECIMEN)	2430	2860	3430
KL25-0078	BIOPSY PROSTATE TRUCUT PACKAGE	4540	5330	6400
KL25-0079	BIOPSY SMALL (HISTOPATHOLOGY, SMALL SPECIMEN)	1500	1760	2130
KL25-0080	BLEEDING TIME	350	400	500
KL25-0081	BLOOD FOR SICKLING	380	440	530
KL25-0082	BLOOD GLUCOSE PP (WITH 75 GRAM GLUCOSE)	220	250	280
KL25-0083	BLOOD GROUP (A B O) & RH FACTOR BY GEL METHOD	620	730	870
KL25-0084	BLOOD GROUPING & RH TYPING	290	340	410
KL25-0085	BLOOD SUGAR (FASTING)	160	190	240
KL25-0086	BLOOD SUGAR (GLUCO METER) FASTING	190	230	270
KL25-0087	BLOOD SUGAR (GLUCO METER) P.P	190	230	270
KL25-0088	BLOOD SUGAR (GLUCO METER) RANDOM	190	230	270

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0089	BLOOD SUGAR BEFORE (DINNER)	160	190	240
KL25-0090	BLOOD SUGAR P.P	160	190	240
KL25-0091	BLOOD SUGAR PP (AFTER DINNER)	160	190	240
KL25-0092	BLOOD SUGAR PP (AFTER LUNCH)	160	190	240
KL25-0093	BLOOD SUGAR PP (BEFORE LUNCH)	160	190	240
KL25-0094	BLOOD SUGAR RANDOM (SUGAR R)	160	190	240
KL25-0095	BONE MARROW ASPIRATION	2260	2660	3190
KL25-0096	BONE MARROW BIOPSY WITH RETICULIN STIN	2290	2690	3230
KL25-0097	BONE MARROW, IRON STAIN	860	1010	1210
KL25-0098	BUN CREATININE RATIO, URINE	880	1030	1240
KL25-0099	C DIFFICILE TOXIN A & B, STOOL	3420	4030	4830
KL25-0100	C3 AND C4 COMPLEMENT PANEL	1860	2180	2610
KL25-0101	C3 COMPLEMENT	1050	1230	1480
KL25-0102	C4 COMPLEMENT	1050	1230	1480
KL25-0103	CA - 19.9 PANCREATIC CANCER MARKER	2110	2490	2980
KL25-0104	CA -15.3 BREAST CANCER MARKER	1800	2120	2540
KL25-0105	CALCIUM (TOTAL)	460	530	630
KL25-0106	CALCIUM 24 HRS. URINE	460	530	630
KL25-0107	CALCIUM IONISED	800	940	1130
KL25-0108	CALCIUM, URINE	480	570	680
KL25-0109	CALCIUM/ CREATININE RATIO, 24 HOURS URINE	880	1030	1240
KL25-0110	CALCIUM/ CREATININE RATIO, RANDOM URINE	810	960	1150
KL25-0111	CANCER MARKER (CA- 125) OVARIAN CANCER MARKER	2030	2390	2860
KL25-0112	CARCINO EMBRYONIC ANTIGEN (CEA)	1230	1450	1740
KL25-0113	CHIKANGUNYA IGG	2270	2670	3200
KL25-0114	CHIKANGUNYA IGM	2270	2670	3200
KL25-0115	CHLORIDE (CL)	460	540	650
KL25-0116	CHLORIDE, 24 HRS. URINARY	530	620	740
KL25-0117	CHLORIDE, BODY FLUID	530	620	740
KL25-0118	CHLORIDE, URINE RANDOM	530	620	740
KL25-0119	CHOLESTEROL (TOTAL)	270	320	390
KL25-0120	CHOLESTEROL HDL	520	610	730
KL25-0121	CHOLESTROL, FLUID	270	320	390
KL25-0122	CHYLE EXAMINATION	860	1010	1220
KL25-0123	CHYLOMICRONS, URINE	670	790	950
KL25-0124	CLOTTING TIME (CT)	370	430	520
KL25-0125	COMPLETE BLOOD COUNT (C.B.C)	490	570	690
KL25-0126	COOMBS TEST, DIRECT (D.C.T)	870	1020	1220
KL25-0127	CORTISOL (EVENING SAMPLE)	1090	1280	1540
KL25-0128	CORTISOL (MORNING SAMPLE)	1090	1280	1540
KL25-0129	CORTISOL (RANDOM)	1090	1280	1540
KL25-0130	CORTISOL, (MID NIGHT SAMPLE)	1090	1280	1540
KL25-0131	CPK (CREATINE PHOPHOKINASE)	690	800	970
KL25-0132	CPK-MB (CREATINE PHOSPHOKINASE - MB)	980	1150	1390

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0133	C-REACTIVE PROTEIN (CRP - QUANTITATIVE)	570	680	820
KL25-0134	C-REACTIVE PROTEIN CARDIO, CARDIO-CRP	1100	1290	1550
KL25-0135	CREATININE	260	310	370
KL25-0136	CREATININE CLEARANCE, 24 HRS. URINE	880	1040	1240
KL25-0137	CREATININE, 24 HRS. URINE	510	580	710
KL25-0138	CREATININE, BODY FLUID	510	580	710
KL25-0139	CREATININE, URINE RANDOM	510	580	710
KL25-0140	CRYPTOCOCCUS ANTIGEN	2500	2940	3530
KL25-0141	CSF Examination(ROUTINE)	1180	1380	1660
KL25-0142	CSF FOR AFB	550	640	770
KL25-0143	CSF FOR FUNGAL STAIN	550	640	770
KL25-0144	CSF FOR GRAM STAIN	550	640	770
KL25-0145	CULTURE, BLOOD (RAPID)	1840	2160	2590
KL25-0146	CULTURE, BLOOD (RAPID) PAIRED BOTTLE	2490	2940	3520
KL25-0147	CULTURE, BLOOD / BODY FLUID - RAPID	1840	2160	2590
KL25-0148	CULTURE, BLOOD FUNGUS	1840	2160	2590
KL25-0149	CULTURE, BODY FLUID (RAPID) AEROBIC	1840	2160	2590
KL25-0150	CULTURE, BODY FLUID FUNGUS	1840	2160	2590
KL25-0151	CULTURE, CONJUNCTIVAL SWAB	1280	1510	1800
KL25-0152	CULTURE, CSF FUNGUS	1410	1660	1990
KL25-0153	CULTURE, CSF RAPID	1410	1660	1990
KL25-0154	CULTURE, FUNGUS	1680	1980	2380
KL25-0155	CULTURE, HVS	1410	1660	1990
KL25-0156	CULTURE, MYCOBACTERIAL BLOOD	2340	2760	3310
KL25-0157	CULTURE, OT	1550	1820	2190
KL25-0158	CULTURE, PUS (PYOGENIC)	1410	1660	1990
KL25-0159	CULTURE, PYOGENIC (NASAL)	1410	1660	1990
KL25-0160	CULTURE, PYOGENIC (RAPID) - MISC EAR,THROAT	1410	1660	1990
KL25-0161	CULTURE, PYOGENIC URETHERAL DISCHARGE CULTURE	1410	1660	1990
KL25-0162	CULTURE, RAPID ANY SPECIMEN	1410	1660	1990
KL25-0163	CULTURE, RAPID MYCOBACTERIUM	1840	2160	2590
KL25-0164	CULTURE, SEMEN (PYOGENIC)	1500	1760	2120
KL25-0165	CULTURE, SPUTUM (PYOGENIC)	1410	1660	1990
KL25-0166	CULTURE, STOOL (PYOGENIC)	1410	1660	1990
KL25-0167	CULTURE, STOOL FOR CHOLERA	1840	2160	2590
KL25-0168	CULTURE, STOOL FOR SALMONELLA, SHIGELLA	1840	2160	2590
KL25-0169	CULTURE, SWAB (EYE)	1410	1660	1990
KL25-0170	CULTURE, SWAB EAR	1410	1660	1990
KL25-0171	CULTURE, THROAT SWAB	1410	1660	1990
KL25-0172	CULTURE, TIP	1410	1660	1990
KL25-0173	CULTURE, TRACHEAL ASPIRATION	1410	1660	1990
KL25-0174	CULTURE, URINE (RAPID)	1370	1610	1930
KL25-0175	CULTURE, VAGINAL SWAB	1410	1660	1990
KL25-0176	CULTURE, WOUND SWAB	1410	1660	1990

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0177	CYTOLOGY SMEAR ROUTINE (MISC) (TLC & DLC)	550	640	770
KL25-0178	CYTOLOGY, CONSULTATION - SECOND OPINION CYTOLOGY	1570	1840	2220
KL25-0179	CYTOLOGY, NIPPLE DISCHARGE	1790	2120	2530
KL25-0180	CYTOMEGALO VIRUS IGG ANTIBODY	1110	1320	1580
KL25-0181	CYTOMEGALO VIRUS IGM AB TITRE (CMV IGM)	1110	1320	1580
KL25-0182	D-DIMER, QUANTITATIVE	1880	2220	2660
KL25-0183	DENGUE IgG - EIA	1000	1180	1410
KL25-0184	DENGUE IgM - EIA	1000	1180	1410
KL25-0185	DENGUE SEROLOGY - NS1 AG	3080	3620	4340
KL25-0186	DENGUE SEROLOGY (ANTIGEN & ANTIBODY) - IgG, IgM, NS1	4250	5000	5990
KL25-0187	DENGUE SEROLOGY FEVER AB IGG & IGM EIA	1800	2120	2540
KL25-0188	DENGUE SEROLOGY FEVER IGG/IGM	2720	3200	3840
KL25-0189	DENGUE SEROLOGY IgG - RAPID	1390	1640	1980
KL25-0190	DENGUE SEROLOGY IgM - RAPID	1390	1640	1980
KL25-0191	DENGUE SEROLOGY NS1 -ELISA	2100	2470	2970
KL25-0192	DHEA SULPHATE	1660	1950	2340
KL25-0193	DIFFERENTIAL LEUCOCYTE COUNT	250	300	360
KL25-0194	DUAL TEST (1ST TRIMESTER) SCREENING	2850	3350	4020
KL25-0195	DYSMORPHIC RBC, URINE	500	580	700
KL25-0196	ECHINOCOCCUS DETECTION FOR SCOCLICES IN HYDATID CYST	860	1010	1210
KL25-0197	eGFR (CLOMERULAR FILTRATION RATE) - PAEDIATRIC	380	440	530
KL25-0198	ELECTROLYTES (SODIUM, POTTASIUM & CALCIUM)	950	1100	1330
KL25-0199	ELECTROLYTES -2 (SODIUM POTASSIUM, CHLORIDE)	950	1100	1330
KL25-0200	ELECTROPHORESIS, HB / HPLC	1640	1930	2310
KL25-0201	EOSINOPHILS (STOOL)	380	440	530
KL25-0202	EOSINOPHILS, URINE	380	440	530
KL25-0203	ESR (Westergrens) AUTOMATED	280	330	400
KL25-0204	ESTRADIOL LEVEL	1180	1380	1660
KL25-0205	ESTRIOL UNCONJUGATED, SERUM uE3	2180	2570	3070
KL25-0206	FAT GLOBULES, STOOL	270	310	380
KL25-0207	FERRITIN	1200	1400	1680
KL25-0208	FIBRINOGEN DEGRADATION PRODUCTS- FDP,BLOOD	1550	1830	2190
KL25-0209	FLUD EXAMINATION ROUTINE PERICARDIAL	1120	1320	1590
KL25-0210	FLUID FOR URATE CRYSTALS	370	430	520
KL25-0211	FLUID EXAMINATION ROUTINE (MISC)	1120	1320	1590
KL25-0212	FLUID EXAMINATION ROUTINE ASCITIC	1120	1320	1590
KL25-0213	FLUID EXAMINATION ROUTINE PLEURAL	1120	1320	1590
KL25-0214	FLUID EXAMINATION ROUTINE PROSTATIC	1120	1320	1590
KL25-0215	FLUID EXAMINATION ROUTINE SYNOVIAL	1120	1320	1590
KL25-0216	FNAC	2000	2350	2820
KL25-0217	FNAC (INTRA OPERATIVE CYTOLOGY)	3210	3780	4540
KL25-0218	FOLATE	2110	2470	2970
KL25-0219	FSH (FOLLICLE STIMULATING HORMONE)	1120	1320	1590
KL25-0220	FSH (FOLLICLE STIMULATING HORMONE).POOLED	1200	1410	1690

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0221	FUNGAL STAINING	550	640	770
KL25-0222	G-6 PHOSPHATE DEHYDROGENASE-QUANTITATIVE	1440	1690	2020
KL25-0223	GALACTOMANNAN (Aspergillus Antigens)	6000	7060	8470
KL25-0224	GAMMA INTEFERON, TB GOLD	3250	3820	4580
KL25-0225	GASTRIC ASPIRATE FOR MATERNAL BLOOD (APT TEST)	520	600	730
KL25-0226	GASTRIC ASPIRATION FOR POLYMORPH	490	560	670
KL25-0227	GCT (GLUCOSE CHALLENGE TEST)	220	240	280
KL25-0228	GENEXPERT MTB WITH RIFAMPICIN RESISTANCE , PCR	2416	2416	2416
KL25-0229	GFR, GLOMERULAR FILTRATION RATE	350	400	500
KL25-0230	GGTP	500	570	680
KL25-0231	GLOBULIN	630	740	890
KL25-0232	GLUCOSE TOLERANCE TEST - 2 SPECIMENS (WHO FORMAT)	400	470	560
KL25-0233	GLUCOSE TOLERANCE TEST - 3 SPECIMENS	560	660	790
KL25-0234	GLUCOSE TOLERANCE TEST - 4 SPECIMENS	710	840	1010
KL25-0235	GLUCOSE TOLERANCE TEST (GTT EXTENDED) 9 SPECIMENS	1630	1920	2300
KL25-0236	GLUCOSE TOLERANCE TEST/RESULT (GTT) 5 SPECIMENS	960	1120	1350
KL25-0237	GLYCOSYLATED HAEMOGLOBIN (Hb A1c)	950	1120	1340
KL25-0238	GRAMS STAINING PER SPECIMEN (MISC)	550	640	770
KL25-0239	H1N1 VIRUS RT-PCR	4500	4500	4500
KL25-0240	HAEMOGLOBIN (BY ABG)	560	670	800
KL25-0241	HAEMOGLOBIN (HB)	250	280	350
KL25-0242	HAEMOGLUBINUREA	410	480	580
KL25-0243	HANGING DROP (FOR VIBRIO ORG.)	300	350	420
KL25-0244	HB, TLC, DLC, ESR	710	830	990
KL25-0245	HEINZ BODIES, PERIPHERAL BLOOD	620	710	860
KL25-0246	HEPATITIS A VIRUS IGM, ANTI HAV (Hepatitis A. Virus) IGM	1880	2220	2660
KL25-0247	HEPATITIS B SURFACE ANTIGEN, HBsAg - RAPID	800	940	1130
KL25-0248	HEPATITIS B VIRAL PCR DNA,QUANTITATIVE	5000	5000	5000
KL25-0249	HEPATITIS C ANTIBODY (ANTI-HCV) TOTAL	2270	2650	3190
KL25-0250	HEPATITIS C ANTIBODY, HCV ANTIBODY - RAPID	1150	1360	1640
KL25-0251	HEPATITIS C VIRAL, PCR RNA, GENEXPERT QUANTITATIVE	3090	3640	4360
KL25-0252	HEPATITIS C VIRAL, PCR RNA, QUANTITATIVE	6000	7060	8470
KL25-0253	HEPATITIS E ANTIBODY IgM (HEV IGM)	2740	3230	3890
KL25-0254	HERPES SIMPLEX VIRUS (I&II) IgG	1080	1270	1530
KL25-0255	HERPES SIMPLEX VIRUS(I & II) IGM	1080	1270	1530
KL25-0256	HISTOCYTOCHEMISTRY PAS STAIN	900	1060	1270
KL25-0257	HISTO-FROZEN SECTION	5500	6470	7770
KL25-0258	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - GASTRECTOMY	3980	4680	5620
KL25-0259	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - HAEMICOLECTOMY	3980	4680	5620
KL25-0260	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - LARGE SOFT TISSUE TUMOR	3980	4680	5620
KL25-0261	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - MANDIBLE	3980	4680	5620
KL25-0262	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - MAXILLECTOMY	3980	4680	5620
KL25-0263	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - RADICAL NECK DISECRTION	3980	4680	5620
KL25-0264	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - RADICAL NECK RESECTION	3980	4680	5620

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0265	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - RADICAL NEPHRECTOMY FOR CANCER	3980	4680	5620
KL25-0266	HISTOPATHOLOGY BIOPSY LARGE SPECIMEN - THYROID FOR CANCER	3980	4680	5620
KL25-0267	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - BREAST LUMP	2160	2540	3050
KL25-0268	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - CYSTECTOMY	3790	4460	5360
KL25-0269	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - GALL BLADDER	2160	2540	3050
KL25-0270	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - HYSTERECTOMY	2690	3160	3800
KL25-0271	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - OVARIAN CYST	2160	2540	3050
KL25-0272	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - PLACENTA	2160	2540	3050
KL25-0273	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - PROSTATE GLAND & TURP	2160	2540	3050
KL25-0274	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - SUPERFICIAL LUMPS	2160	2540	3050
KL25-0275	HISTOPATHOLOGY BIOPSY MEDIUM SPECIMEN - THYROID	2160	2540	3050
KL25-0276	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - APPENDIX	1430	1680	2020
KL25-0277	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - CONJUNCTIVAL BIOPSY	1430	1680	2020
KL25-0278	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - ENDOMETRIUM	1430	1680	2020
KL25-0279	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - ENDOSCOPIC BIOPSIES	1430	1680	2020
KL25-0280	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - FALLOPIAN TUBES	1430	1680	2020
KL25-0281	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - FISTULA IN ANO	1430	1680	2020
KL25-0282	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - PILONIDAL SINUS	1430	1680	2020
KL25-0283	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - SKIN BIOPSY	1430	1680	2020
KL25-0284	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - SMALL DIAGNOSTIC BIOPSIES	1430	1680	2020
KL25-0285	HISTOPATHOLOGY BIOPSY SMALL SPECIMEN - TRUCUT BIOPISIES	1430	1680	2020
KL25-0286	HISTOPATHOLOGY CONSULTATION (2ND OPINION)	2600	3060	3670
KL25-0287	HISTOPATHOLOGY STAIN-ACID FAST (Z.N STAIN)	870	1040	1220
KL25-0288	HISTOPATHOLOGY STAIN-RETICULIN	740	860	1040
KL25-0289	HISTOPATHOLOGY, BIOPSY, SKIN	1400	1650	1980
KL25-0290	HISTOPATHOLOGY, BLOCK PREPARATION - EACH	1060	1220	1470
KL25-0291	HIV (AIDS) ANTIBODY I & II (HIV) - BY CHEMI LUMENESCENCE	1340	1580	1900
KL25-0292	HIV (AIDS) ANTIBODY I & II (HIV) - RAPID	900	1060	1260
KL25-0293	HLA B- 27 (BY PCR)	3400	4000	4800
KL25-0294	HOMA-IR ; INSULIN RESISTANCE INDEX	1200	1410	1700
KL25-0295	HOMOCYSTEINE QUANTITATIVE	1570	1840	2220
KL25-0296	HPV DNA (HUMAN PAPILLOMA VIRUS) HIGH RISK BY PCR	2600	3060	3670
KL25-0297	I-ANY 1 MARKER - IMMUNOHISTOCHEMISTRY	2660	3130	3750
KL25-0298	I-ANY 2 MARKERS - IMMUNOHISTOCHEMISTRY	4740	5580	6690
KL25-0299	I-ANY 3 MARKERS - IMMUNOHISTOCHEMISTRY	6290	7400	8880
KL25-0300	I-ANY 4 MARKERS - IMMUNOHISTOCHEMISTRY	6490	7630	9160
KL25-0301	I-ANY 5 MARKERS - IMMUNOHISTOCHEMISTRY	7260	8540	10250
KL25-0302	I-ANY 6 MARKERS - IMMUNOHISTOCHEMISTRY	8100	9530	11430
KL25-0303	I-ANY 7 MARKERS - IMMUNOHISTOCHEMISTRY	9100	10710	12850
KL25-0304	I-ANY 8 MARKERS - IMMUNOHISTOCHEMISTRY	10590	12460	14950
KL25-0305	I-BREAST CANCER PANEL 3	5520	6490	7390
KL25-0306	IGE LEVEL	1410	1660	1990
KL25-0307	I-IMMUNOHISTOCHEMISTRY - AMACR	2650	3110	3740
KL25-0308	I-IMMUNOHISTOCHEMISTRY - BETA CATENIN	2790	3290	3940

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0309	I-IMMUNOHISTOCHEMISTRY - DOG-1	2300	2710	3250
KL25-0310	I-IMMUNOHISTOCHEMISTRY ,p40	2500	2940	3530
KL25-0311	I-IMMUNOHISTOCHEMISTRY 34-BETA E12	2850	3350	4020
KL25-0312	I-IMMUNOHISTOCHEMISTRY BCL-2	2410	2830	3400
KL25-0313	I-IMMUNOHISTOCHEMISTRY BCL-6 (ONCOPROTEIN)	2600	3050	3660
KL25-0314	I-IMMUNOHISTOCHEMISTRY CALRETININ	2190	2580	3090
KL25-0315	I-IMMUNOHISTOCHEMISTRY CD - 10	2660	3130	3750
KL25-0316	I-IMMUNOHISTOCHEMISTRY CD - 117	2190	2580	3090
KL25-0317	I-IMMUNOHISTOCHEMISTRY CD 138	2190	2580	3090
KL25-0318	I-IMMUNOHISTOCHEMISTRY CD 20	2190	2580	3090
KL25-0319	I-IMMUNOHISTOCHEMISTRY CD 34 STEM CELLS	2500	2940	3530
KL25-0320	I-IMMUNOHISTOCHEMISTRY CD-15	2190	2580	3090
KL25-0321	I-IMMUNOHISTOCHEMISTRY CD-3	2190	2580	3090
KL25-0322	I-IMMUNOHISTOCHEMISTRY CD-30	2190	2580	3090
KL25-0323	I-IMMUNOHISTOCHEMISTRY CD-45 LEUCOCYTE COMMON AG)	2550	3000	3600
KL25-0324	I-IMMUNOHISTOCHEMISTRY CD-68	2190	2580	3090
KL25-0325	I-IMMUNOHISTOCHEMISTRY CEA	2190	2580	3090
KL25-0326	I-IMMUNOHISTOCHEMISTRY CHROMO GRANIN A	2190	2580	3090
KL25-0327	I-IMMUNOHISTOCHEMISTRY CK 19	2660	3130	3750
KL25-0328	I-IMMUNOHISTOCHEMISTRY CK 20	2660	3130	3750
KL25-0329	I-IMMUNOHISTOCHEMISTRY CK 5/6	2190	2580	3090
KL25-0330	I-IMMUNOHISTOCHEMISTRY CK 7	2190	2580	3090
KL25-0331	I-IMMUNOHISTOCHEMISTRY CUSTOM PANEL	8390	9870	11840
KL25-0332	I-IMMUNOHISTOCHEMISTRY CYTOKERATIN (PANCYTOKERATIN)	2190	2580	3090
KL25-0333	I-IMMUNOHISTOCHEMISTRY CYTOKERATIN 20	2660	3130	3750
KL25-0334	I-IMMUNOHISTOCHEMISTRY DESMIN	2190	2580	3090
KL25-0335	I-IMMUNOHISTOCHEMISTRY E CADHERIN	2520	2960	3560
KL25-0336	I-IMMUNOHISTOCHEMISTRY EBV	2360	2780	3330
KL25-0337	I-IMMUNOHISTOCHEMISTRY EGFR (EPIDERMAL GROWTH FACTOR)	2660	3130	3750
KL25-0338	I-IMMUNOHISTOCHEMISTRY EPITHELIAL MEMBRANE ANTIGEN - EMA	2190	2580	3090
KL25-0339	I-IMMUNOHISTOCHEMISTRY GFAP	2190	2580	3090
KL25-0340	I-IMMUNOHISTOCHEMISTRY HER-2/NEU (C-ERB B-2)-O.M	2150	2530	3020
KL25-0341	I-IMMUNOHISTOCHEMISTRY INHIBIN	2190	2580	3090
KL25-0342	I-IMMUNOHISTOCHEMISTRY KI-67	2660	3130	3750
KL25-0343	I-IMMUNOHISTOCHEMISTRY MELAN A	2660	3130	3750
KL25-0344	I-IMMUNOHISTOCHEMISTRY NSE	2190	2580	3090
KL25-0345	I-IMMUNOHISTOCHEMISTRY -P40	2790	3280	3940
KL25-0346	I-IMMUNOHISTOCHEMISTRY P53 (TUMOR SUPRESSOR GENE)	2190	2580	3090
KL25-0347	I-IMMUNOHISTOCHEMISTRY P63	2190	2580	3090
KL25-0348	I-IMMUNOHISTOCHEMISTRY PAX 5 (BSAP)	2490	2930	3510
KL25-0349	I-IMMUNOHISTOCHEMISTRY PAX 8	2660	3130	3750
KL25-0350	I-IMMUNOHISTOCHEMISTRY PLAP	2520	2960	3560
KL25-0351	I-IMMUNOHISTOCHEMISTRY PR ('PROGESTERONE RECEPTOR)	2150	2530	3020
KL25-0352	I-IMMUNOHISTOCHEMISTRY PSA	2190	2580	3090

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0353	I-IMMUNOHISTOCHEMISTRY S-100 PROTEIN	2190	2580	3090
KL25-0354	I-IMMUNOHISTOCHEMISTRY SERUM AMYLOID ASSOCIATED (SAA)	2490	2930	3510
KL25-0355	I-IMMUNOHISTOCHEMISTRY SMA	2360	2780	3330
KL25-0356	I-IMMUNOHISTOCHEMISTRY SYNAPTOPHYSIN BLOCK	2190	2580	3090
KL25-0357	I-IMMUNOHISTOCHEMISTRY TTF - I	2660	3130	3750
KL25-0358	I-IMMUNOHISTOCHEMISTRY V-9 (VIMENTIN)	2190	2580	3090
KL25-0359	I-IMMUNOHISTOCHEMISTRY WT-1	2660	3130	3750
KL25-0360	I-IMMUNOHISTOCHEMISTRY, 34-BETA E12	2580	3020	3640
KL25-0361	I-IMMUNOHISTOCHEMISTRY, Ber-Ep4 (EpCAM)	2530	2980	3570
KL25-0362	I-IMMUNOHISTOCHEMISTRY, CALDESMON	2530	2980	3570
KL25-0363	I-IMMUNOHISTOCHEMISTRY, CD 138	2580	3020	3640
KL25-0364	I-IMMUNOHISTOCHEMISTRY, CD 21	2090	2460	2950
KL25-0365	I-IMMUNOHISTOCHEMISTRY, CD 5	2090	2460	2950
KL25-0366	I-IMMUNOHISTOCHEMISTRY, CEA	2580	3020	3640
KL25-0367	I-IMMUNOHISTOCHEMISTRY, HEPATOCYTE SPECIFIC ANTIGEN (HSA)	2090	2460	2950
KL25-0368	I-IMMUNOHISTOCHEMISTRY, HMB 45	2090	2460	2950
KL25-0369	I-IMMUNOHISTOCHEMISTRY, LAMBDA LIGHT CHAINS	2530	2980	3570
KL25-0370	I-IMMUNOHISTOCHEMISTRY, MYOGENIN	2660	3120	3760
KL25-0371	I-IMMUNOHISTOCHEMISTRY, BETA-CATENIN	2530	2980	3570
KL25-0372	I-IMMUNOHISTOCHEMISTRY, CD 34	2090	2460	2950
KL25-0373	I-IMMUNOHISTOCHEMISTRY, C-MYC	2530	2980	3570
KL25-0374	I-IMMUNOHISTOCHEMISTRY, CYTOKERATIN 19	2530	2980	3570
KL25-0375	I-IMMUNOHISTOCHEMISTRY, ER (ESTROGEN RECEPTOR)	2150	2530	3020
KL25-0376	I-IMMUNOHISTOCHEMISTRY, GATA-3	2530	2980	3570
KL25-0377	I-IMMUNOHISTOCHEMISTRY, GLYPICAN - 3	2530	2980	3570
KL25-0378	I-IMMUNOHISTOCHEMISTRY, IDH-1	2660	3130	3750
KL25-0379	I-IMMUNOHISTOCHEMISTRY, KAPPA LIGHT CHAINS	2530	2980	3570
KL25-0380	I-IMMUNOHISTOCHEMISTRY, MUM1	2400	2830	3380
KL25-0381	I-IMMUNOHISTOCHEMISTRY, OCt 2	2380	2790	3350
KL25-0382	I-IMMUNOHISTOCHEMISTRY, P16	2400	2830	3380
KL25-0383	I-IMMUNOHISTOCHEMISTRY, P40	2660	3120	3760
KL25-0384	I-IMMUNOHISTOCHEMISTRY, pS2	1870	2190	2630
KL25-0385	I-IMMUNOHISTOCHEMISTRY, SALL 4	2530	2980	3570
KL25-0386	I-IMMUNOHISTOCHEMISTRY, SOX10	2400	2830	3380
KL25-0387	I-IMMUNOHISTOCHEMISTRY-ATRX	2530	2980	3570
KL25-0388	I-IMMUNOHISTOCHEMISTRY-THYROGLOBULIN	2490	2930	3510
KL25-0389	INDIA INK PREPARATION CSF	620	730	860
KL25-0390	INDIA INK PREPARATION FLUID	620	730	860
KL25-0391	INSULIN FASTING	1360	1600	1920
KL25-0392	INSULIN PP	1360	1600	1920
KL25-0393	INSULIN RANDOM	1360	1600	1920
KL25-0394	INTERLEUKIN 6	3150	3700	4440
KL25-0395	IRON + TIBC (IRON/TIBC)	830	970	1180
KL25-0396	KETONE BODIES - BLOOD	920	1080	1310

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0397	KETONE BODIES, URINE	250	290	350
KL25-0398	KIDNEY FUNCTION TEST(KFT)	1120	1320	1590
KL25-0399	KOH SCRAPING FOR FUNGUS	500	580	700
KL25-0400	LACTATE	1300	1530	1830
KL25-0401	LACTATE CSF	1300	1530	1830
KL25-0402	LACTATE -FLUID	1400	1650	1980
KL25-0403	LDH (LACTIC DEHYDROGENASE)	790	930	1100
KL25-0404	LDH BODY FLUID	790	930	1100
KL25-0405	LDL	790	930	1100
KL25-0406	LE CELL PHENOMENON (LE CELL)	620	730	870
KL25-0407	LEPTOSPIRA ANTIBODIES PANEL, IGG & IGM	4450	4990	5980
KL25-0408	LEPTOSPIRA ANTIBODY IGG	2250	2650	3170
KL25-0409	LEPTOSPIRA ANTIBODY IGM	2250	2650	3170
KL25-0410	LIPASE	1130	1330	1600
KL25-0411	LIPASE, FLUID	1130	1330	1600
KL25-0412	LIPASE, URINE	1130	1330	1600
KL25-0413	LIPID PROFILE	1160	1370	1640
KL25-0414	LIPID PROFILE (A1&B) - Extended	3700	4350	5220
KL25-0415	LIQUID BASE CYTOLOGY (GYNAE)	1420	1670	2000
KL25-0416	LIQUID BASE CYTOLOGY (NON-GYNAE)	1500	1770	2120
KL25-0417	LIVER ASPIRATE FOR AMOEBAE	520	610	730
KL25-0418	LIVER FUNCTION TEST	1120	1320	1590
KL25-0419	LUTEINIZING HORMONE (LH)	1080	1270	1530
KL25-0420	LUTEINIZING HORMONE (LH).POOLED SAMPLE	1160	1360	1630
KL25-0421	MAGNESIUM	860	1010	1220
KL25-0422	MAGNESIUM CREATININE RATIO, URINE	1650	1940	2330
KL25-0423	MAGNESIUM, 24 HRS. URINE	1080	1270	1530
KL25-0424	MAGNESIUM, RANDOM URINE	1080	1270	1530
KL25-0425	MALARIA PARASITE (M.P.)	590	690	830
KL25-0426	MALIGNANT CELLS (ASCITIC FLUID)	1650	1940	2330
KL25-0427	MALIGNANT CELLS (BAL)	1650	1940	2330
KL25-0428	MALIGNANT CELLS (CYTOLOGY)	1650	1940	2330
KL25-0429	MALIGNANT CELLS (NIPPLE DISCHARGE)	1650	1940	2330
KL25-0430	MALIGNANT CELLS (PERICARDIAL FLUID)	1650	1940	2330
KL25-0431	MALIGNANT CELLS (PLEURAL FLUID)	1650	1940	2330
KL25-0432	MALIGNANT CELLS (SPUTUM)	1650	1940	2330
KL25-0433	MALIGNANT CELLS (URINE)	1650	1940	2330
KL25-0434	MANTOUX TEST (MX) PPD TUBERCULIN SKIN TEST	290	350	420
KL25-0435	MCH (MEAN CORPUSCULAR HB)	260	310	370
KL25-0436	MCHC (MEAN CORPUSCULAR Hb CONCENTRATION)	260	310	370
KL25-0437	MCV (MEAN CORPUSCULAR VOL)	360	310	370
KL25-0438	MEAN PLATELET VOLUME, MPV	330	380	460
KL25-0439	METHAEMOGLOBIN	1090	1280	1540
KL25-0440	MICRO ALBUMIN / CREATININE RATIO	1210	1430	1700

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0441	MICROALBUMIN, 24 HRS. URINE	1100	1300	1560
KL25-0442	MICROALBUMIN, BODY FLUID	1100	1300	1560
KL25-0443	MICROALBUMIN, URINE	1100	1300	1560
KL25-0444	MICROALBUMIN/CREATININE RATIO, 24 HRS. URINE	1350	1590	1920
KL25-0445	MODIFIED Z.N. STAIN	820	970	1170
KL25-0446	MODIFIED Z.N. STAIN FOR LEPRAE	820	950	1170
KL25-0447	MYCOBACTERIUM TUBERCULOSIS PCR QUALITATIVE (REAL TIME)	2350	2770	3320
KL25-0448	MYOGLOBIN (QUALITATIVE) URINE	370	430	520
KL25-0449	NASAL SMEAR FOR EOSINOPHIL	370	430	520
KL25-0450	NT PRO BNP	3890	4570	5480
KL25-0451	OCCULT BLOOD	260	310	370
KL25-0452	OSMOLALITY SERUM	1080	1270	1530
KL25-0453	OSMOLALITY URINE	1080	1270	1530
KL25-0454	PAP SMEAR	1100	1300	1560
KL25-0455	PAPP-A	2000	2340	2820
KL25-0456	PARATHYROID HORMONE (PARATHYROID) PTH INTACT	2540	2990	3600
KL25-0457	PCV (PACKED CELL VOL)	250	280	350
KL25-0458	PERIPHERAL SMEAR (P.S.)	530	640	760
KL25-0459	PERIPHERAL SMEAR FOR MICROFILARIA	250	280	350
KL25-0460	PERITONEAL FLUID FOR AFB	550	640	770
KL25-0461	PERITONEAL FLUID FOR FUNGAL STAIN	550	640	770
KL25-0462	PERITONEAL FLUID FOR GRAM STAIN	550	640	770
KL25-0463	pH- FLUID	160	190	230
KL25-0464	PH VALUE, URINE	200	240	280
KL25-0465	PHOSPHOROUS	330	390	470
KL25-0466	PHOSPHOROUS CREATININE RATIO, URINE	1060	1250	1500
KL25-0467	PHOSPHOROUS, 24 HRS. URINE	530	620	740
KL25-0468	PHOSPHOROUS, URINE	530	620	740
KL25-0469	PLATELET COUNT (THROMBOCYTE COUNT)	250	280	350
KL25-0470	PLATELET DISTRIBUTION WIDTH PDW	310	370	450
KL25-0471	PLEURAL FLUID FOR AFB	550	640	770
KL25-0472	PLEURAL FLUID FOR FUNGAL STAIN	550	640	770
KL25-0473	PLEURAL FLUID FOR GRAM STAIN	550	640	770
KL25-0474	PORPHOBILINOGEN (Qualitative) SCREENING, URINE	470	560	670
KL25-0475	POTASSIUM	330	390	470
KL25-0476	POTASSIUM (BY ABG)	600	700	850
KL25-0477	POTASSIUM, 24 HRS. URINE	540	630	760
KL25-0478	POTASSIUM, FLUID	540	630	760
KL25-0479	POTASSIUM, URINE	540	630	760
KL25-0480	PREGNANCY TEST, URINE	340	400	480
KL25-0481	PROCALCITONIN	3980	4690	5620
KL25-0482	PROLACTIN	1110	1320	1580
KL25-0483	PROLACTIN POOLED SAMPLE	1200	1410	1690
KL25-0484	PROSTATIC CORE BIOPSY	3790	4460	5360

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0485	PROTEIN -CREATININE RATIO-URINE	1210	1430	1700
KL25-0486	PROTEIN ELECTROPHORESIS, SERUM	840	990	1190
KL25-0487	PROTEIN STUDIES (TOTAL DIFFERENTIAL ALBUMIN/GLOBULIN RATIO)	550	650	770
KL25-0488	PROTEIN, 24 HRS. URINE	490	570	690
KL25-0489	PROTEIN, FLUID	490	570	690
KL25-0490	PROTEIN, TOTAL	290	360	430
KL25-0491	PROTEIN, TOTAL CSF	530	630	760
KL25-0492	PROTEIN, URINE	530	630	760
KL25-0493	PROTEIN-CREATININE RATIO -24 HOUR URINE	1300	1520	1820
KL25-0494	PROTHROMBIN TIME (PT+INR) PT+PTI+INR	590	710	840
KL25-0495	PSA PROFILE	2520	2970	3550
KL25-0496	PSA TOTAL (PROSTATE SPECIFIC ANTIGEN)	1270	1500	1790
KL25-0497	PSA, FREE	1390	1640	1950
KL25-0498	PTTK (APTT) TIME TEST/CONTROL	910	1060	1270
KL25-0499	PUS FOR AFB	550	640	770
KL25-0500	PUS FOR FUNGAL STAIN	550	640	770
KL25-0501	PUS FOR GRAM STAIN	550	640	770
KL25-0502	QF PCR + CMA750K +WES MCC	50000	50000	50000
KL25-0503	QF PCR +MCC+MICROARRAY (750 K)	17000	17000	17000
KL25-0504	RA FACTOR	760	910	1070
KL25-0505	RA FACTOR, SYNOVIAL FLUID	760	910	1070
KL25-0506	RAPID CARBAPENAMASE GENE DETECTION (PHENOTYPIC)	1600	1600	1600
KL25-0507	RAPID TEST FOR INFLUENZA	2360	2760	3330
KL25-0508	RAPID TEST FOR MALARIAL ANTIGEN	1020	1200	1440
KL25-0509	RBC COUNT	330	380	460
KL25-0510	RDW-SD	330	380	460
KL25-0511	REDUCING SUBSTANCES, URINE	210	250	300
KL25-0512	RETICULOCYTE COUNT	580	680	820
KL25-0513	RUBELLA VIRUS IGG	1110	1320	1580
KL25-0514	RUBELLA VIRUS IGM	1110	1320	1580
KL25-0515	SEMEN ANALYSIS ROUTINE	820	970	1170
KL25-0516	SERUM ASCITES ALBUMIN GRADIENT (SAAG)	560	660	790
KL25-0517	SGOT (AST)	270	320	390
KL25-0518	SGPT (ALT)	270	320	390
KL25-0519	SMALL SPECIMEN BIOPSY - PUNCH/TRUCUT BIOSY-MASS	1430	1680	2020
KL25-0520	SMEAR ASPIRATE FOR AMOEBAE	520	620	740
KL25-0521	SMEAR EXAMINATION GONOCOCCUS	480	570	680
KL25-0522	SODIUM	330	380	460
KL25-0523	SODIUM (BY ABG)	590	690	830
KL25-0524	SODIUM, 24 HRS. URINE	530	620	740
KL25-0525	SODIUM, URINE RANDOM	530	620	740
KL25-0526	SPECIAL STAIN- CONGO RED	660	780	930
KL25-0527	SPECIFIC GRAVITY, URINE	180	210	250
KL25-0528	SPERM WASH (SEMEN)	2620	3080	3690

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0529	SPUTUM FOR ACID FAST BACILLUS	550	640	770
KL25-0530	SPUTUM FOR EOSINOPHILS COUNT	550	640	770
KL25-0531	SPUTUM FOR FUNGAL STAIN	550	640	770
KL25-0532	SPUTUM FOR GRAM STAIN	550	640	770
KL25-0533	STOOL EXAMINATION PH VALUE	140	170	200
KL25-0534	STOOL EXAMINATION RAPID TEST FOR CHOLERA (MOTILITY INHIBITION TEST)	1080	1280	1530
KL25-0535	STOOL OCCULT BLOOD	260	310	370
KL25-0536	STOOL ROUTINE	260	310	370
KL25-0537	SUGAR (FASTING), URINE	130	150	180
KL25-0538	SUGAR (P.P.), URINE	130	150	180
KL25-0539	SUGAR (RANDOM), URINE	130	150	180
KL25-0540	SUGAR, FLUID	170	200	240
KL25-0541	SUGAR, REDUCING	200	240	280
KL25-0542	SYNOVIAL FLUID FOR AFB	550	640	770
KL25-0543	SYNOVIAL FLUID FOR FUNGAL STAIN	550	640	770
KL25-0544	SYNOVIAL FLUID FOR GRAM STAIN	550	640	770
KL25-0545	SYNOVIAL FLUID, CYTOLOGY & COUNT	1150	1350	1620
KL25-0546	T3 (TRIIODOTHYRONINE)	460	540	650
KL25-0547	T3, FREE	600	700	850
KL25-0548	T4 (THYROXINE)	460	540	650
KL25-0549	T4, FREE	600	700	850
KL25-0550	TESTOSTERONE (TOTAL)	1130	1330	1600
KL25-0551	THYROGLOBULIN ANTIBODIES (ANTI TGA)	2090	2460	2950
KL25-0552	THYROID ANTIBODIES (ANTI TG & TPO)	3730	4380	5260
KL25-0553	THYROID PROFILE (FREE)	1370	1610	1930
KL25-0554	THYROID PROFILE (T3, T4, TSH)	910	1080	1290
KL25-0555	TISSUE FOR AFB	550	640	770
KL25-0556	TISSUE FOR FUNGAL STAIN	550	640	770
KL25-0557	TISSUE FOR GRAM STAIN	550	640	770
KL25-0558	TISSUE TRANSGLUTAMINASE ANTIBODY (TTG) IGA	1550	1820	2190
KL25-0559	TLC & DLC, FLUID	500	580	700
KL25-0560	TLC (Total Leucocyte Count)	230	260	310
KL25-0561	TORCH [IgG]	2220	2600	3130
KL25-0562	TORCH [IgM]	2220	2600	3130
KL25-0563	TOXOPLASMA IGG AB TITRE (TOX IGG)	1110	1320	1580
KL25-0564	TOXOPLASMA IGM AB TITRE (TOX IGM)	1110	1320	1580
KL25-0565	TPHA	1050	1210	1460
KL25-0566	TRACHEAL ASPIRATE FOR AFB	550	640	770
KL25-0567	TRACHEAL ASPIRATE FOR FUNGAL STAIN	550	640	770
KL25-0568	TRACHEAL ASPIRATE FOR GRAM STAIN	550	640	770
KL25-0569	TRANSFERRIN SATURATION(T-SAT)	910	1070	1280
KL25-0570	TRBC (TOTAL RED BLOOD CELL)	310	370	450
KL25-0571	TRIGLYCERIDE	450	520	620
KL25-0572	TRIGLYCERIDES, FLUID	450	520	620

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-0573	TRIGLYCERIDES, URINE	450	520	620
KL25-0574	TRIPLE H (HBsAg Rapid, HCV Rapid & HIV I & II Rapid)	2850	3360	4030
KL25-0575	TROP - T (RAPID)	2900	3420	4090
KL25-0576	TROPONIN- I QUANTITATIVE	3670	4320	5180
KL25-0577	TROPONIN T QUANTITATIVE	2900	3420	4090
KL25-0578	TROPONIN-I (TROP-I) RAPID	3670	4310	5180
KL25-0579	TSH (THYROID STIMULATING HORMONE) ULTRASENSITIVE	520	610	730
KL25-0580	TYPHI DOT (IGG)	590	710	840
KL25-0581	TYPHI DOT (IGG/IGM)	1210	1430	1700
KL25-0582	TYPHI DOT IGM	760	910	1070
KL25-0583	TYPHUS FEVER IGM (SCRUB)	1630	1920	2300
KL25-0584	UREA (BLOOD)	230	270	330
KL25-0585	UREA CREATININE RATIO, URINE	1050	1230	1480
KL25-0586	UREA FLUID	260	310	370
KL25-0587	UREA NITROGEN (BUN) BLOOD	290	340	400
KL25-0588	UREA NITROGEN (BUN), 24 HRS. URINE	290	340	400
KL25-0589	UREA NITROGEN (BUN), URINE RANDOM	290	340	400
KL25-0590	UREA, 24 HRS. URINE	450	530	640
KL25-0591	UREA, URINE RANDOM	450	530	640
KL25-0592	URIC ACID	260	310	370
KL25-0593	URIC ACID FLUID	260	310	370
KL25-0594	URIC ACID, 24 HRS. URINE	480	570	680
KL25-0595	URIC ACID, URINE RANDOM	480	570	680
KL25-0596	URINE FAT GLOBULES	230	270	330
KL25-0597	URINE FOR AFB	550	640	770
KL25-0598	URINE FOR FUNGAL STAIN	550	640	770
KL25-0599	URINE FOR GRAM STAIN	550	640	770
KL25-0600	URINE ROUTINE (AUTOMATED)	210	250	300
KL25-0601	UROBILINOGEN, QUALITATIVE, 24 HRS. URINE	390	490	560
KL25-0602	UROBILINOGEN, QUALITATIVE, URINE RANDOM	270	310	380
KL25-0603	VAGINAL SMEAR (WET SMEAR FOR TRICHOMONAS)	550	640	770
KL25-0604	VASCULITIS - LIA	6530	7690	9220
KL25-0605	VDRL	270	320	390
KL25-0606	VDRL (C.S.F.)	270	320	390
KL25-0607	VITAMIN B-12 & VITAMIN D3 (25 HYDROXY)	2960	3490	4180
KL25-0608	VITAMIN B-12 LEVEL	1390	1630	1960
KL25-0609	VITAMIN D3 (25 HYDROXY)	2090	2460	2950
KL25-0610	VLDL	570	680	810
KL25-0611	WIDAL TEST	370	430	520
KL25-0612	YEAST IDENTIFICATION	1890	2220	2670
KL25-0613	YEAST SUSCEPTIBILITY TEST	1890	2220	2670
KLO25-0614	ALPHA-1 ANTITRYPSIN DEFICIENCY - SERPINA1 GENE ANALYSIS (M)	30000	30000	30000
KLO25-0615	CYTOPRIME MICROARRAY TEST(350K PROBES) (G)	15000	15000	15000
KLO25-0616	CYTOSURE MICROARRAY TEST (750K PROBES) (G)	24700	24700	24700

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0617	TTC7A GENE ANALYSIS (M)	30000	30000	30000
KLO25-0618	(1,3)-BETA-D, GLUCAN (BDG)	10800	10800	10800
KLO25-0619	(FRAGMENT ANALYSIS) (BS)	12000	12000	12000
KLO25-0620	06-METHYLGUANINE METHYLTRASFERASE (MGMT) PROMOTER	7800	7800	7800
KLO25-0621	14-3-3 IDENTRA (TM)	8180	8180	8180
KLO25-0622	17 HYDROXY PROGESTRONE (17OHP)	1400	1400	1400
KLO25-0623	17 HYDROXYCORTICOSTEROIDS & 17 KETOSTEROIDS 24 HOUR URINE	13000	13000	13000
KLO25-0624	17 HYDROXYCORTICOSTEROIDS 24 HOUR URINE	7200	7200	7200
KLO25-0625	17 HYDROXYPREGNENOLONE	9300	9300	9300
KLO25-0626	17 HYDROXYPROGESTERONE NEONATAL SCREEN	280	280	280
KLO25-0627	17 KETOSTEROIDS WITH CREATININE, 24 HRS. URINE.	7200	7200	7200
KLO25-0628	17 KETOSTEROIDS, 24 HRS. URINE	6200	6200	6200
KLO25-0629	1p36	6000	6000	6000
KLO25-0630	21 HYDROXYLASE AB	8130	8130	8130
KLO25-0631	3 ALPHA ANDOSTANEDIOL GLUCURONIDE (3 ALPHA DIOL G)	6910	6910	6910
KLO25-0632	3 METHLY HISTIDINE- BLOOD	7500	7500	7500
KLO25-0633	3 METHLY HISTIDINE- URINE	7500	7500	7500
KLO25-0634	4 DRUG PANEL	2720	2720	2720
KLO25-0635	4H SYNDROME GENE PANEL (M)	36000	36000	36000
KLO25-0636	5 ALPHA DIHYDROTESTOSTERONE	2900	2900	2900
KLO25-0637	5 AMINOLEVULINIC ACID (5 ALA) - QUALITATIVE	4300	4300	4300
KLO25-0638	5 AMINOLEVULINIC ACID (5 ALA) - QUANTITATIVE	4300	4300	4300
KLO25-0639	5 AMINOLEVULINIC ACID (5 ALA), [2nd morning Urine]), URINE, QUALITATIVE	4300	4300	4300
KLO25-0640	5 FLUOROURACIL TOXICITY (DPD GENE MUTATION)	7600	7600	7600
KLO25-0641	5 HYDROXYINDOLEACETIC ACID 24 HOUR URINE	3800	3800	3800
KLO25-0642	5 HYDROXYINDOLEACETIC ACID RANDOM URINE	3800	3800	3800
KLO25-0643	5 NUCLEOTIDASE	10410	10410	10410
KLO25-0644	5FU ASSAY (5 FLUOROURACIL) (DPYD) (BS)	4200	4200	4200
KLO25-0645	6 BETA HYDROXYCORTISOL 24 HOUR URINE	16570	16570	16570
KLO25-0646	6 DRUG PANEL	4400	4400	4400
KLO25-0647	7 DRUG PANEL	4750	4750	4750
KLO25-0648	8 DRUG PANEL	5900	5900	5900
KLO25-0649	9P21 GENOTYPE	2720	2720	2720
KLO25-0650	ABCA12 (HARLEQUIN ICHTHYOSIS) GENE ANALYSIS (M)	30000	30000	30000
KLO25-0651	ABCB4 DELETION DUPLICATION ANALYSIS (M)	20000	20000	20000
KLO25-0652	ABCD1 DELETION/DUPLICATION (M)	20000	20000	20000
KLO25-0653	ABCD3 - FLOWCYTOMETRY	3000	3000	3000
KLO25-0654	ABORTION PANEL- FLOWCYTOMETRY	17500	17500	17500
KLO25-0655	ABPA -MINI	2500	2500	2500
KLO25-0656	ABPA -PANEL	3500	3500	3500
KLO25-0657	ACCUTYPE CLOPIDOGREL CYP2C19, GENOTYPE	40000	40000	40000
KLO25-0658	ACCUTYPE IL28B	5000	5000	5000
KLO25-0659	ACCUTYPE METFORMIN	6000	6000	6000
KLO25-0660	ACETAMINOPHEN - PER SPECIMEN	3050	3050	3050

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0661	ACETONE, SERUM	550	550	550
KLO25-0662	ACETONE, SERUM (QUANTITATIVE)	9970	9970	9970
KLO25-0663	ACETONE, URINE	160	160	160
KLO25-0664	ACETYLCHOLINE RECEPTOR BINDING ANTIBODY(ACHR)	2300	2300	2300
KLO25-0665	ACETYLCHOLINE RECEPTOR BLOCKING ANTIBODY	14600	14600	14600
KLO25-0666	ACETYLCHOLINE RECEPTOR MODULATING ANTIBODY	19100	19100	19100
KLO25-0667	ACETYLCHOLINESTERASE, AMNIOTIC FLUID	9200	9200	9200
KLO25-0668	ACETYLCHOLINESTERASE, PLASMA	1500	1500	1500
KLO25-0669	ACETYLCHOLINESTERASE, RBC, BLOOD	2730	2730	2730
KLO25-0670	ACHONDROPLASIA (FGFR3 FULL GENE (BS)	31200	31200	31200
KLO25-0671	ACHONDROPLASIA (FGFR3) GENE ANALYSIS (M)	30000	30000	30000
KLO25-0672	ACHONDROPLASIA (FGR3 GENE G1138A,G1138C) (BS)	7480	7480	7480
KLO25-0673	ACHONDROPLASIA FGFR3 G380R COMMON MUTATION SCREENING (M)	15000	15000	15000
KLO25-0674	ACID LIPASE DISORDER : WOLMAN DISEASE	7280	7280	7280
KLO25-0675	ACID PHOSPHATASE -TOTAL AND PROSTATIC FRACTION, SERUM	500	500	500
KLO25-0676	ACID PHOSPHATASE, PROSTATIC	360	360	360
KLO25-0677	ACID PHOSPHATASE, TOTAL	190	190	190
KLO25-0678	ACIDIFIED SERUM LYSIS TEST, SERUM & BLOOD	1500	1500	1500
KLO25-0679	ACTH PLASMA	1600	1600	1600
KLO25-0680	ACTH STIMULATION TEST -17 HYDROXYPROGESTERONE	2800	2800	2800
KLO25-0681	ACTH STIMULATION TEST FOR ALDOSTERONE - PER SPECIMEN	5000	5000	5000
KLO25-0682	ACTH STIMULATION TEST FOR ANDROSTENEDIONE - PER SPECIMEN	3900	3900	3900
KLO25-0683	ACTH STIMULATION TEST FOR CORTISOL - PER SPECIMEN	1800	1800	1800
KLO25-0684	ACTH STIMULATION TEST FOR DHEA - PER SPECIMEN	5200	5200	5200
KLO25-0685	ACTH STIMULATION TEST FOR PROGESTERONE - PER SPECIMEN	600	600	600
KLO25-0686	ACTH, PLASMA, BY EXTRACTION	13470	13470	13470
KLO25-0687	ACTH-ADRENO CORTICOTROPIC HORMONE, TISSUE	1980	1980	1980
KLO25-0688	ACTIN (Smooth Muscle) Ab (IgG)	2700	2700	2700
KLO25-0689	ACTITEST AND FIBROTEST, SERUM	15750	15750	15750
KLO25-0690	ACTIVATED PROTEIN C RESISTANCE APCR	4580	4580	4580
KLO25-0691	ACTN3 GENOTYPING (SPORTS GENE TEST)	6700	6700	6700
KLO25-0692	ACUTE ENCEPHALITIS PANEL	25000	25000	25000
KLO25-0693	ACUTE INTERMITTENT PORPHYRIA - HMBS GENE ANALYSIS (M)	30000	30000	30000
KLO25-0694	ACUTE KIDNEY INJURY PANEL	8650	8650	8650
KLO25-0695	ACUTE LEUKEMIA CLASSIFIER PANEL - FLOWCYTOMETRY (M)	11000	11000	11000
KLO25-0696	ACUTE LEUKEMIA DIAGNOSTIC COMPREHENSIVE PROFILE	27000	27000	27000
KLO25-0697	ACUTE LEUKEMIA SCREEN PANEL - FLOWCYTOMETRY (M)	9000	9000	9000
KLO25-0698	ACUTE LYMPHOBLASTIC LEUKEMIA (ALL)	15100	15100	15100
KLO25-0699	ACUTE MYELOID LEUKEMIA (AML, CYTOGENETICS PANEL	18900	18900	18900
KLO25-0700	ACUTE PROMYELOCYTIC LEUKEMIA (APL)	4800	4800	4800
KLO25-0701	ACYL CARNITINE, QUANTITATIVE , NEONATAL	4680	4680	4680
KLO25-0702	ADAMTS13 ACTIVITY	21600	21600	21600
KLO25-0703	ADDITIONAL FAMILY MEMBER (INVESTIGATIONAL) TESTING (M)	4500	4500	4500
KLO25-0704	ADENOCARCINOMA V/S MALIGNANT MESOTHELIOMA (CEA, EMA, VIMENTIN, LWCK)	6900	6900	6900

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0705	ADENOVIRUS ANTIBODY, SERUM	5040	5040	5040
KLO25-0706	ADENOVIRUS ANTIGEN FOR GASTROENTERITIS. STOOL	1580	1580	1580
KLO25-0707	ADENOVIRUS ANTIGEN FOR RESPIRATORY INFECTIONS	1700	1700	1700
KLO25-0708	ADENOVIRUS- DNA QUANTITATIVE REAL TIME PCR	11380	11380	11380
KLO25-0709	ADENOVIRUS DNA SWAB, PCR	4300	4300	4300
KLO25-0710	ADENOVIRUS- IGG ANTIBODY, SERUM	1700	1700	1700
KLO25-0711	ADENOVIRUS- IGM ANTIBODY, SERUM	1700	1700	1700
KLO25-0712	ADENOVIRUS-DNA RESPIRATORY FLUID, PCR	4300	4300	4300
KLO25-0713	ADIPOKINE PANEL I	36000	36000	36000
KLO25-0714	ADIPOKINE PANEL II	51000	51000	51000
KLO25-0715	ADIPONECTIN	2725	2725	2725
KLO25-0716	ADRB2 GENOTYPE FOR B2 AGONIST REPONSIVENESS, BLOOD, PCR	4080	4080	4080
KLO25-0717	ADRENAL ANTIBODY SCREEN	13000	13000	13000
KLO25-0718	ADRENOCORTEX STRESS PROFILE	14000	14000	14000
KLO25-0719	AFB - MTB ANTIBIOGRAM (1st LINE DRUG) - 4 DRUGS	5100	5100	5100
KLO25-0720	AFB - MTB ANTIBIOGRAM (1st & 2nd LINE DRUG) -10 DRUGS	11900	11900	11900
KLO25-0721	AFB- DETECTION OF rRNA	2500	2500	2500
KLO25-0722	AFB- DETECTION OF rRNA REFLEX RAPID CULTURE	2800	2800	2800
KLO25-0723	AFB- DIFFERENTIATION & SPECIATION	2700	2700	2700
KLO25-0724	AFB IDENTIFICATION - RAPID, PNB TEST	1500	1500	1500
KLO25-0725	AFB MDR SCREEN (HAINS LINE PROBE ASSAY)- OTHER RESPIRATORY SAMPLE	1950	1950	1950
KLO25-0726	AFB- MDR SCREEN (HAINS LINE PROBE ASSAY)- EXTRA PULMONARY	1950	1950	1950
KLO25-0727	AFB- MOTT ANTIBIOGRAM PANEL (RAPID GROWERS)-10 DRUGS	7880	7880	7880
KLO25-0728	AFB- MOTT ANTIBIOGRAM PANEL (SLOW GROWERS)-10 DRUGS	8930	8930	8930
KLO25-0729	AFB- MOTT SPEICIATION ADDITIONAL SPECIES (HAINS LINE PROBE ASSAY)	3500	3500	3500
KLO25-0730	AFB- MTB ANTIBOGRAM - INDIVIDUAL DRUG	2150	2150	2150
KLO25-0731	AFB- MTB ANTIBOGRAM PANEL -2 LINE DRUGS	5300	5300	5300
KLO25-0732	AFB- MTB ANTIBOGRAM PANEL -ADDITIONAL DRUGS	5500	5500	5500
KLO25-0733	AFB- MTB ANTIBOGRAM PANEL -COMPREHENSIVE PANEL-13 DRUGS	13000	13000	13000
KLO25-0734	AFB SUSPECTIBILITY, BACTEC, SIREP PANEL	6000	6000	6000
KLO25-0735	AFB- XDR SCREEN (HAINS LINE PROBE ASSAY)- EXTRA PULMONARY SAMPLES	5000	5000	5000
KLO25-0736	AFB- XDR SCREEN (HAINS LINE PROBE ASSAY)- OTHER RESPIRATORY SAMPLES	5000	5000	5000
KLO25-0737	AFB- XPERT PANEL BY GENEXPERT - COMBO	2900	2900	2900
KLO25-0738	AFB- XPERT PANEL BY GENEXPERT REFLEX AFB RAPID CULTURE	2600	2600	2600
KLO25-0739	AGAMMAGLOBULINEMIA (BTK) GENE ANALYSIS (M)	30000	30000	30000
KLO25-0740	AICARDI-GOUTIERES SYNDROME GENE PANEL (M)	36000	36000	36000
KLO25-0741	ALAGILLE SYNDROME GENE PANEL (M)	36000	36000	36000
KLO25-0742	ALBINISM GENE PANEL	25000	25000	25000
KLO25-0743	ALBUMIN & IGG, CSF	2600	2600	2600
KLO25-0744	ALBUMIN, CSF	1400	1400	1400
KLO25-0745	ALCOHOL ETHYL GLUCURONIDE & ETHYL SULPHATE	3200	3200	3200
KLO25-0746	ALCOHOL SCREEN, BLOOD	750	750	750
KLO25-0747	ALCOHOL SCREEN, RANDOM URINE	1400	1400	1400
KLO25-0748	ALDEHYDE CHOPRA TEST FOR KALAZAR	280	280	280

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0749	ALDOLASE (L)	760	760	760
KLO25-0750	ALDOSTERONE	1800	1800	1800
KLO25-0751	ALDOSTERONE, 24 HRS URINE	1800	1800	1800
KLO25-0752	ALDOSTERONE/ PLASMA RENIN DIRECT RATIO	7200	7200	7200
KLO25-0753	ALEXANDER DISEASE (GFAP) GENE ANALYSIS (M)	30000	30000	30000
KLO25-0754	ALK D5F3 (M)	5500	5500	5500
KLO25-0755	ALKALINE PHOSPHATASE ISOENZYME ELECTROPHORESIS	5600	5600	5600
KLO25-0756	ALKALINE PHOSPHATASE ISOENZYME, SPECTROPHOTOMETRY, SERUM	3800	3800	3800
KLO25-0757	ALKALINE PHOSPHATASE, BONE SPECIFIC (BSAP)	4500	4500	4500
KLO25-0758	ALKAPTONURIA, URINE. QUALITATIVE	310	310	310
KLO25-0759	ALKAPTONURIA, URINE. QUANTITATIVE	3500	3500	3500
KLO25-0760	ALL RISK STRATIFICATION GENE PANEL - B-ALL (M)	36000	36000	36000
KLO25-0761	ALL RISK STRATIFICATION GENE PANEL - T-ALL (M)	36000	36000	36000
KLO25-0762	ALLERGY , SCREENING TRYPTASE	2000	2000	2000
KLO25-0763	ALLERGY ANY 10 ALLERGENS	9700	9700	9700
KLO25-0764	ALLERGY ANY 5 ALLERGENS	5400	5400	5400
KLO25-0765	ALLERGY ANY ONE ALLERGEN	1400	1400	1400
KLO25-0766	ALLERGY ASTHMA/RHINTIS PANEL-ADULT	7600	7600	7600
KLO25-0767	ALLERGY ASTHMA/RHINTIS PANEL-PAEDRIATIC	7600	7600	7600
KLO25-0768	ALLERGY CHILD PANEL, SERUM	13460	13460	13460
KLO25-0769	ALLERGY COMPREHENSIVE PROFILE, ADULT	14000	14000	14000
KLO25-0770	ALLERGY COMPREHENSIVE PROFILE, PEDIATRIC	14000	14000	14000
KLO25-0771	ALLERGY DRUG PANEL, (MAXI)	7000	7000	7000
KLO25-0772	ALLERGY DRUG PANEL, SERUM	4830	4830	4830
KLO25-0773	ALLERGY EAST INDIA REGION, SERUM	11000	11000	11000
KLO25-0774	ALLERGY ECZEMA PANEL (NON VEG & VEG)	11900	11900	11900
KLO25-0775	ALLERGY ECZEMA PANEL (NON VEG)	7600	7600	7600
KLO25-0776	ALLERGY ECZEMA PANEL (VEG)	5900	5900	5900
KLO25-0777	ALLERGY FOOD (VEG AND NON VEG)	9500	9500	9500
KLO25-0778	ALLERGY FOOD (VEG)	5600	5600	5600
KLO25-0779	ALLERGY FOOD PANEL, LEAFY VEGETABLE	3000	3000	3000
KLO25-0780	ALLERGY FOOD PANEL-1	7600	7600	7600
KLO25-0781	ALLERGY FOOD PANEL-2	7600	7600	7600
KLO25-0782	ALLERGY FRUIT PANEL-1	3800	3800	3800
KLO25-0783	ALLERGY FRUIT PANEL-2	3800	3800	3800
KLO25-0784	ALLERGY GROUP PANEL,SERUM	7100	7100	7100
KLO25-0785	ALLERGY INDIVIDUAL - ANY ONE DRUG	1400	1400	1400
KLO25-0786	ALLERGY INDIVIDUAL ALLERGEN, ACACIA	1200	1200	1200
KLO25-0787	ALLERGY INDIVIDUAL, ALDER	1200	1200	1200
KLO25-0788	ALLERGY INDIVIDUAL, ALMOND	1200	1200	1200
KLO25-0789	ALLERGY INDIVIDUAL, ALTERNERIA TENUIS	1200	1200	1200
KLO25-0790	ALLERGY INDIVIDUAL, AMOXYCILLIN	1400	1400	1400
KLO25-0791	ALLERGY INDIVIDUAL, AMPICILLIN	1400	1400	1400
KLO25-0792	ALLERGY INDIVIDUAL, APPLE	1200	1200	1200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0793	ALLERGY INDIVIDUAL, APRICOT	1400	1400	1400
KLO25-0794	ALLERGY INDIVIDUAL, ASCARIS	1400	1400	1400
KLO25-0795	ALLERGY INDIVIDUAL, ASPARAGUS	1400	1400	1400
KLO25-0796	ALLERGY INDIVIDUAL, ASPERGILLUS FUMIGATUS	1200	1200	1200
KLO25-0797	ALLERGY INDIVIDUAL, BAHIA GRASS	1200	1200	1200
KLO25-0798	ALLERGY INDIVIDUAL, BAKER YEAST	1400	1400	1400
KLO25-0799	ALLERGY INDIVIDUAL, BANANA	1200	1200	1200
KLO25-0800	ALLERGY INDIVIDUAL, BARLEY	1400	1400	1400
KLO25-0801	ALLERGY INDIVIDUAL, BASIL	1400	1400	1400
KLO25-0802	ALLERGY INDIVIDUAL, BEEF	1200	1200	1200
KLO25-0803	ALLERGY INDIVIDUAL, BERMUDA GRASS	1200	1200	1200
KLO25-0804	ALLERGY INDIVIDUAL, BIRCH	1400	1400	1400
KLO25-0805	ALLERGY INDIVIDUAL, BLACK PEPPER	1400	1400	1400
KLO25-0806	ALLERGY INDIVIDUAL, BLUE MUSSEL	1200	1200	1200
KLO25-0807	ALLERGY INDIVIDUAL, BRAZIL NUT	1400	1400	1400
KLO25-0808	ALLERGY INDIVIDUAL, BRINJAL	1200	1200	1200
KLO25-0809	ALLERGY INDIVIDUAL, BROCOLLI	1400	1400	1400
KLO25-0810	ALLERGY INDIVIDUAL, BUCKWHEAT	1200	1200	1200
KLO25-0811	ALLERGY INDIVIDUAL, CABBAGE	1200	1200	1200
KLO25-0812	ALLERGY INDIVIDUAL, CANDIDA ALBICANS	1200	1200	1200
KLO25-0813	ALLERGY INDIVIDUAL, CAROB	1200	1200	1200
KLO25-0814	ALLERGY INDIVIDUAL, CARROT	1200	1200	1200
KLO25-0815	ALLERGY INDIVIDUAL, CASEIN	1200	1200	1200
KLO25-0816	ALLERGY INDIVIDUAL, CASHEW NUT	1200	1200	1200
KLO25-0817	ALLERGY INDIVIDUAL, CAT DANDER	1400	1400	1400
KLO25-0818	ALLERGY INDIVIDUAL, CAT DANDER & EPITHELIUM	1400	1400	1400
KLO25-0819	ALLERGY INDIVIDUAL, CAT DANDER (E1) IGE , USA	4000	4000	4000
KLO25-0820	ALLERGY INDIVIDUAL, CAT EPITHELIUM	1200	1200	1200
KLO25-0821	ALLERGY INDIVIDUAL, CAULIFLOWER	1400	1400	1400
KLO25-0822	ALLERGY INDIVIDUAL, CELERY	1200	1200	1200
KLO25-0823	ALLERGY INDIVIDUAL, CEPHALOSPORIN	1400	1400	1400
KLO25-0824	ALLERGY INDIVIDUAL, CHEDDAR	1200	1200	1200
KLO25-0825	ALLERGY INDIVIDUAL, CHERRY	1400	1400	1400
KLO25-0826	ALLERGY INDIVIDUAL, CHICKEN	1200	1200	1200
KLO25-0827	ALLERGY INDIVIDUAL, CHICKEN FEATHER	1400	1400	1400
KLO25-0828	ALLERGY INDIVIDUAL, CHICKPEA	1200	1200	1200
KLO25-0829	ALLERGY INDIVIDUAL, CHILLI PEPPER	1400	1400	1400
KLO25-0830	ALLERGY INDIVIDUAL, CLADOSPORIUM HERBARUM	1200	1200	1200
KLO25-0831	ALLERGY INDIVIDUAL, CLAM, IGE	2630	2630	2630
KLO25-0832	ALLERGY INDIVIDUAL, COCKLEBUR	1200	1200	1200
KLO25-0833	ALLERGY INDIVIDUAL, COCKROACH	1200	1200	1200
KLO25-0834	ALLERGY INDIVIDUAL, COCOA	1200	1200	1200
KLO25-0835	ALLERGY INDIVIDUAL, COCONUT	1200	1200	1200
KLO25-0836	ALLERGY INDIVIDUAL, COFFEE	1200	1200	1200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0837	ALLERGY INDIVIDUAL, COMMON PIGWEED	1200	1200	1200
KLO25-0838	ALLERGY INDIVIDUAL, COMMON RAGEWEED	1200	1200	1200
KLO25-0839	ALLERGY INDIVIDUAL, COMMON REED GRASS	1400	1400	1400
KLO25-0840	ALLERGY INDIVIDUAL, CORN	1400	1400	1400
KLO25-0841	ALLERGY INDIVIDUAL, COTTON WOOD	1200	1200	1200
KLO25-0842	ALLERGY INDIVIDUAL, COW DANGER	1200	1200	1200
KLO25-0843	ALLERGY INDIVIDUAL, CRAB IGE	2260	2260	2260
KLO25-0844	ALLERGY INDIVIDUAL, CUCUMBER	1200	1200	1200
KLO25-0845	ALLERGY INDIVIDUAL, CURRY	1400	1400	1400
KLO25-0846	ALLERGY INDIVIDUAL, DATE	1200	1200	1200
KLO25-0847	ALLERGY INDIVIDUAL, DERMATOPHAGOIDES.F,	1400	1400	1400
KLO25-0848	ALLERGY INDIVIDUAL, DERMATOPHAGOIDES.P	1400	1400	1400
KLO25-0849	ALLERGY INDIVIDUAL, DOG DANGER	1200	1200	1200
KLO25-0850	ALLERGY INDIVIDUAL, EGG WHITE	1200	1200	1200
KLO25-0851	ALLERGY INDIVIDUAL, EGG WHOLE	1400	1400	1400
KLO25-0852	ALLERGY INDIVIDUAL, EGG YOLK	1200	1200	1200
KLO25-0853	ALLERGY INDIVIDUAL, ELM	1200	1200	1200
KLO25-0854	ALLERGY INDIVIDUAL, ENGLISH PLAINTAIN	1400	1400	1400
KLO25-0855	ALLERGY INDIVIDUAL, EUCALYPTUS	1200	1200	1200
KLO25-0856	ALLERGY INDIVIDUAL, FENNEL	1400	1400	1400
KLO25-0857	ALLERGY INDIVIDUAL, FIG	1400	1400	1400
KLO25-0858	ALLERGY INDIVIDUAL, FISH	1200	1200	1200
KLO25-0859	ALLERGY INDIVIDUAL, FLOR DUST	1400	1400	1400
KLO25-0860	ALLERGY INDIVIDUAL, FOOD ALPHA LACTABUMIN MILK PROTEIN	1400	1400	1400
KLO25-0861	ALLERGY INDIVIDUAL, FOOD CASEIN, DAHI	1400	1400	1400
KLO25-0862	ALLERGY INDIVIDUAL, GARLIC	1200	1200	1200
KLO25-0863	ALLERGY INDIVIDUAL, GINGER	1400	1400	1400
KLO25-0864	ALLERGY INDIVIDUAL, GLUTEN	2000	2000	2000
KLO25-0865	ALLERGY INDIVIDUAL, GOAT EPITHELIUM	1400	1400	1400
KLO25-0866	ALLERGY INDIVIDUAL, GOOSEFOOT	1200	1200	1200
KLO25-0867	ALLERGY INDIVIDUAL, GRAPE	1400	1400	1400
KLO25-0868	ALLERGY INDIVIDUAL, GREEN BEAN	1400	1400	1400
KLO25-0869	ALLERGY INDIVIDUAL, GREEN PEA	1400	1400	1400
KLO25-0870	ALLERGY INDIVIDUAL, GREEN PEPPER	1400	1400	1400
KLO25-0871	ALLERGY INDIVIDUAL, HAZEL NUT	1400	1400	1400
KLO25-0872	ALLERGY INDIVIDUAL, HELIMINTHOSPORIUM HALODES	1400	1400	1400
KLO25-0873	ALLERGY INDIVIDUAL, HONEY BEE	1400	1400	1400
KLO25-0874	ALLERGY INDIVIDUAL, HORSE DANGER	1200	1200	1200
KLO25-0875	ALLERGY INDIVIDUAL, HOUSE DUST	1200	1200	1200
KLO25-0876	ALLERGY INDIVIDUAL, INSECT PAPER WASP	1400	1400	1400
KLO25-0877	ALLERGY INDIVIDUAL, INSULIN	1400	1400	1400
KLO25-0878	ALLERGY INDIVIDUAL, INSULIN PORCINE	1400	1400	1400
KLO25-0879	ALLERGY INDIVIDUAL, ISOCYNATE- HDI	1400	1400	1400
KLO25-0880	ALLERGY INDIVIDUAL, ISOCYNATE- MDI	1400	1400	1400

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0881	ALLERGY INDIVIDUAL, JOHNSON GRASS	1200	1200	1200
KLO25-0882	ALLERGY INDIVIDUAL, KIWI FRUIT	1400	1400	1400
KLO25-0883	ALLERGY INDIVIDUAL, LAMB, SERUM	1400	1400	1400
KLO25-0884	ALLERGY INDIVIDUAL, LATEX	1400	1400	1400
KLO25-0885	ALLERGY INDIVIDUAL, LEMON	1200	1200	1200
KLO25-0886	ALLERGY INDIVIDUAL, LENTIL	1200	1200	1200
KLO25-0887	ALLERGY INDIVIDUAL, LETTUCE	1400	1400	1400
KLO25-0888	ALLERGY INDIVIDUAL, LOBSTER	1100	1100	1100
KLO25-0889	ALLERGY INDIVIDUAL, MACEREL	2550	2550	2550
KLO25-0890	ALLERGY INDIVIDUAL, MAIZE	1200	1200	1200
KLO25-0891	ALLERGY INDIVIDUAL, MALT	1400	1400	1400
KLO25-0892	ALLERGY INDIVIDUAL, MANGO	1200	1200	1200
KLO25-0893	ALLERGY INDIVIDUAL, MEADOW FESCUE	1400	1400	1400
KLO25-0894	ALLERGY INDIVIDUAL, MEADOW GRASS	1200	1200	1200
KLO25-0895	ALLERGY INDIVIDUAL, MELALEUCA	1200	1200	1200
KLO25-0896	ALLERGY INDIVIDUAL, MELON	1400	1400	1400
KLO25-0897	ALLERGY INDIVIDUAL, MESQUITE	1200	1200	1200
KLO25-0898	ALLERGY INDIVIDUAL, METAL CHROMIUM	1400	1400	1400
KLO25-0899	ALLERGY INDIVIDUAL, MILK	1200	1200	1200
KLO25-0900	ALLERGY INDIVIDUAL, MINT	1400	1400	1400
KLO25-0901	ALLERGY INDIVIDUAL, MITES	2000	2000	2000
KLO25-0902	ALLERGY INDIVIDUAL, MOTH	1400	1400	1400
KLO25-0903	ALLERGY INDIVIDUAL, MOUSE EPITHELIUM	1400	1400	1400
KLO25-0904	ALLERGY INDIVIDUAL, MUCOR RACEMOSUS	1400	1400	1400
KLO25-0905	ALLERGY INDIVIDUAL, MUGWORT	1200	1200	1200
KLO25-0906	ALLERGY INDIVIDUAL, MULBERRY	1200	1200	1200
KLO25-0907	ALLERGY INDIVIDUAL, MUSHROOM	1200	1200	1200
KLO25-0908	ALLERGY INDIVIDUAL, MUSTARD	1400	1400	1400
KLO25-0909	ALLERGY INDIVIDUAL, MUTTON	1200	1200	1200
KLO25-0910	ALLERGY INDIVIDUAL, NETTLE	1400	1400	1400
KLO25-0911	ALLERGY INDIVIDUAL, OAK	1200	1200	1200
KLO25-0912	ALLERGY INDIVIDUAL, OAT	1200	1200	1200
KLO25-0913	ALLERGY INDIVIDUAL, OLIVE	1200	1200	1200
KLO25-0914	ALLERGY INDIVIDUAL, ONION	1200	1200	1200
KLO25-0915	ALLERGY INDIVIDUAL, ORANGE	1200	1200	1200
KLO25-0916	ALLERGY INDIVIDUAL, ORCHARD GRASS	1400	1400	1400
KLO25-0917	ALLERGY INDIVIDUAL, OYESTER	1400	1400	1400
KLO25-0918	ALLERGY INDIVIDUAL, PAIETARIA OFFICINATIS,	1400	1400	1400
KLO25-0919	ALLERGY INDIVIDUAL, PAPAYA	1400	1400	1400
KLO25-0920	ALLERGY INDIVIDUAL, PAPRIKA	1200	1200	1200
KLO25-0921	ALLERGY INDIVIDUAL, PARROT FEATHER	1400	1400	1400
KLO25-0922	ALLERGY INDIVIDUAL, PEA	1200	1200	1200
KLO25-0923	ALLERGY INDIVIDUAL, PEACH	1200	1200	1200
KLO25-0924	ALLERGY INDIVIDUAL, PEANUT	1200	1200	1200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0925	ALLERGY INDIVIDUAL, PEAR	1200	1200	1200
KLO25-0926	ALLERGY INDIVIDUAL, PECAN	1200	1200	1200
KLO25-0927	ALLERGY INDIVIDUAL, PENCILIUM NOTATUM	1200	1200	1200
KLO25-0928	ALLERGY INDIVIDUAL, PIGEON DROPPINGS	1400	1400	1400
KLO25-0929	ALLERGY INDIVIDUAL, PINEAPPLE	1200	1200	1200
KLO25-0930	ALLERGY INDIVIDUAL, PISTACHIO	1200	1200	1200
KLO25-0931	ALLERGY INDIVIDUAL, PLUMP	1400	1400	1400
KLO25-0932	ALLERGY INDIVIDUAL, POPPY SEED	1400	1400	1400
KLO25-0933	ALLERGY INDIVIDUAL, PORK	1200	1200	1200
KLO25-0934	ALLERGY INDIVIDUAL, POTATO	1200	1200	1200
KLO25-0935	ALLERGY INDIVIDUAL, PUMPKIN	1400	1400	1400
KLO25-0936	ALLERGY INDIVIDUAL, RABBIT APITH	1400	1400	1400
KLO25-0937	ALLERGY INDIVIDUAL, RAGWEED	1400	1400	1400
KLO25-0938	ALLERGY INDIVIDUAL, RAPE POLLEN	1400	1400	1400
KLO25-0939	ALLERGY INDIVIDUAL, RAPESEED	1200	1200	1200
KLO25-0940	ALLERGY INDIVIDUAL, RED KIDNEY BEAN	1400	1400	1400
KLO25-0941	ALLERGY INDIVIDUAL, RICE	1200	1200	1200
KLO25-0942	ALLERGY INDIVIDUAL, RYE	1200	1200	1200
KLO25-0943	ALLERGY INDIVIDUAL, RYE GRASS	1200	1200	1200
KLO25-0944	ALLERGY INDIVIDUAL, SALMON	1200	1200	1200
KLO25-0945	ALLERGY INDIVIDUAL, SESAME	1200	1200	1200
KLO25-0946	ALLERGY INDIVIDUAL, SHRIMP	1200	1200	1200
KLO25-0947	ALLERGY INDIVIDUAL, SILK	1400	1400	1400
KLO25-0948	ALLERGY INDIVIDUAL, SOYABEAN	1200	1200	1200
KLO25-0949	ALLERGY INDIVIDUAL, SPINACH	1200	1200	1200
KLO25-0950	ALLERGY INDIVIDUAL, SQUID	3090	3090	3090
KLO25-0951	ALLERGY INDIVIDUAL, STRAWBERRY	1200	1200	1200
KLO25-0952	ALLERGY INDIVIDUAL, SUNFLOWER	1400	1400	1400
KLO25-0953	ALLERGY INDIVIDUAL, SWEET POTATO	1400	1400	1400
KLO25-0954	ALLERGY INDIVIDUAL, SWINE EPITHELIUM	1400	1400	1400
KLO25-0955	ALLERGY INDIVIDUAL, SWORDFISH	3090	3090	3090
KLO25-0956	ALLERGY INDIVIDUAL, TEA	1400	1400	1400
KLO25-0957	ALLERGY INDIVIDUAL, TIMOTHY GRASS	1200	1200	1200
KLO25-0958	ALLERGY INDIVIDUAL, TOMATO	1200	1200	1200
KLO25-0959	ALLERGY INDIVIDUAL, TROUT	2630	2630	2630
KLO25-0960	ALLERGY INDIVIDUAL, TUNA	1200	1200	1200
KLO25-0961	ALLERGY INDIVIDUAL, TURKEY	1200	1200	1200
KLO25-0962	ALLERGY INDIVIDUAL, VANILLA	1400	1400	1400
KLO25-0963	ALLERGY INDIVIDUAL, VELVET	1400	1400	1400
KLO25-0964	ALLERGY INDIVIDUAL, WALNUT	1200	1200	1200
KLO25-0965	ALLERGY INDIVIDUAL, WATER MELON	1400	1400	1400
KLO25-0966	ALLERGY INDIVIDUAL, WHEAT	1200	1200	1200
KLO25-0967	ALLERGY INDIVIDUAL, WHITE BEAN	1200	1200	1200
KLO25-0968	ALLERGY INDIVIDUAL, WHITE PINE	1200	1200	1200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-0969	ALLERGY INDIVIDUAL, WILLOW	1200	1200	1200
KLO25-0970	ALLERGY INDIVIDUAL, WOOL	1400	1400	1400
KLO25-0971	ALLERGY INDIVIDUAL, YEAST	1200	1200	1200
KLO25-0972	ALLERGY INDIVIDUAL,CEFALOCHLOR	1200	1200	1200
KLO25-0973	ALLERGY INDIVIDUAL,MOONG DAL	1200	1200	1200
KLO25-0974	ALLERGY INDIVIDUAL,MOSQUITO	1400	1400	1400
KLO25-0975	ALLERGY MILK PANEL	4000	4000	4000
KLO25-0976	ALLERGY MONITORING EOSINOPHIL CATOINIC PROTEIN (ECP)	1300	1300	1300
KLO25-0977	ALLERGY NORTH INDIA REGION	11990	11990	11990
KLO25-0978	ALLERGY PANEL (FOOD FX-5) INFANTS, SERUM	5340	5340	5340
KLO25-0979	ALLERGY PANEL , GIT PANEL, VEG	19785	19785	19785
KLO25-0980	ALLERGY PANEL GIT, SERUM	5200	5200	5200
KLO25-0981	ALLERGY PANEL, ANIMAL	3800	3800	3800
KLO25-0982	ALLERGY PANEL, DUST	3800	3800	3800
KLO25-0983	ALLERGY PANEL, FLEXI ANY 15	12000	12000	12000
KLO25-0984	ALLERGY PANEL, FLEXI ANY 20	15000	15000	15000
KLO25-0985	ALLERGY PANEL, FLEXI ANY 25	17500	17500	17500
KLO25-0986	ALLERGY PANEL, FLEXI ANY 30	19500	19500	19500
KLO25-0987	ALLERGY PANEL, FOOD SCREENING FOR INDIAN POPULATION	6000	6000	6000
KLO25-0988	ALLERGY PANEL, GIT PANEL (VEG & NON-VEG)	27250	27250	27250
KLO25-0989	ALLERGY PANEL, GRASS	3800	3800	3800
KLO25-0990	ALLERGY PANEL, INDOOR	2800	2800	2800
KLO25-0991	ALLERGY PANEL, INHALATION SCREENING FOR INDIAN POPULATION	6000	6000	6000
KLO25-0992	ALLERGY PANEL, INSECTS	2700	2700	2700
KLO25-0993	ALLERGY PANEL, MOULD	4300	4300	4300
KLO25-0994	ALLERGY PANEL, OCCUPATION	13080	13080	13080
KLO25-0995	ALLERGY PANEL, OUTDOOR	5670	5670	5670
KLO25-0996	ALLERGY PANEL, TREE	4900	4900	4900
KLO25-0997	ALLERGY PANEL-FOOD OIL 6 PARAMETERS	3815	3815	3815
KLO25-0998	ALLERGY PANEL-MOLD-2	3500	3500	3500
KLO25-0999	ALLERGY POST SCREENING COMPREHENSIVE PROFILE, ADULT	12400	12400	12400
KLO25-1000	ALLERGY PROFILE -COMPREHENSIVE (S)	12500	12500	12500
KLO25-1001	ALLERGY REGIONAL PANEL, EAST	10800	10800	10800
KLO25-1002	ALLERGY REGIONAL PANEL, SOUTH	10800	10800	10800
KLO25-1003	ALLERGY REGIONAL PANEL, WEST	10800	10800	10800
KLO25-1004	ALLERGY RHINITIS PANEL-BASIC	7600	7600	7600
KLO25-1005	ALLERGY RHINITIS PANEL-EXTENDED	12535	12535	12535
KLO25-1006	ALLERGY SCREEN, ADULT	1800	1800	1800
KLO25-1007	ALLERGY SCREEN, SEAFOOD (CODFISH, BLUE MUSSEL, SALMON, SHRIMP, TUNA)	5995	5995	5995
KLO25-1008	ALLERGY SOUTH INDIA REGION, SERUM	11010	11010	11010
KLO25-1009	ALLERGY VEGETABLE PANEL 1	3900	3900	3900
KLO25-1010	ALLERGY VEGETABLE PANEL-2	3300	3300	3300
KLO25-1011	ALLERGY VEGETABLE PANEL-3	3200	3200	3200
KLO25-1012	ALLERGY, VEGETARIAN PANEL	10800	10800	10800

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1013	ALLERGY, ANTIBIOTIC PROFILE, 8 PARAMETERS	7200	7200	7200
KLO25-1014	ALLERGY, CENTRAL INDIA REGION, SERUM	10900	10900	10900
KLO25-1015	ALLERGY, CEREAL PANEL	7100	7100	7100
KLO25-1016	ALLERGY, ECZEMA PANEL	11900	11900	11900
KLO25-1017	ALLERGY, ENVIRONMENTAL PANEL-29 PARAMETERS	17005	17005	17005
KLO25-1018	ALLERGY, FOOD PANEL	7600	7600	7600
KLO25-1019	ALLERGY, FOOD SPICES PANEL -11 PARAMETERS	8200	8200	8200
KLO25-1020	ALLERGY, FRUIT PANEL. COMPREHENSIVE	8600	8600	8600
KLO25-1021	ALLERGY, INHALANT PANEL	8900	8900	8900
KLO25-1022	ALLERGY, NON VEGETARIAN PANEL	10000	10000	10000
KLO25-1023	ALLERGY, NUT PANEL	5400	5400	5400
KLO25-1024	ALLERGY, PULSES PANEL	3200	3200	3200
KLO25-1025	ALLERGY, SEAFOOD 11 PARAMETERS	5500	5500	5500
KLO25-1026	ALLERGY, SKIN ALLERGY PANEL-VEGETARIANS	9900	9900	9900
KLO25-1027	ALLERGY, TREE PANEL EXTENDED	4250	4250	4250
KLO25-1028	ALLERGY, VEGETABLE PANEL	7600	7600	7600
KLO25-1029	ALLERGY, WEED PANEL	4900	4900	4900
KLO25-1030	ALLERGY, WHEEZE / RHINITIS PANEL, ADULT	14000	14000	14000
KLO25-1031	ALLERGY, WHEEZE / RHINITIS PANEL, PEDIATRIC	10800	10800	10800
KLO25-1032	ALOPECIA - GENETIC HAIR LOSS TEST, BLOOD-PCR	4500	4500	4500
KLO25-1033	ALPHA - FETOPROTEIN, AMNIOTIC FLUID, AFP, AMNIOTIC FLUID	900	900	900
KLO25-1034	ALPHA 1 ACID GLYCOPROTEIN	5630	5630	5630
KLO25-1035	ALPHA 1 ANTITRYPSIN PHENOTYPE	12500	12500	12500
KLO25-1036	ALPHA 1 ANTITRYPSIN QUANTITATION	2200	2200	2200
KLO25-1037	ALPHA 2 MACROGLOBULIN	3000	3000	3000
KLO25-1038	ALPHA -FETOPROTEIN L3 FRACTION	2000	2000	2000
KLO25-1039	ALPHA FUCOSIDASE	5500	5500	5500
KLO25-1040	ALPHA GALACTOSIDASE	6240	6240	6240
KLO25-1041	ALPHA GLUCOSIDASE	8010	8010	8010
KLO25-1042	ALPHA IDURONIDASE	6760	6760	6760
KLO25-1043	ALPHA MANNOSIDASE	6240	6240	6240
KLO25-1044	ALPHA N ACETYL GLUCOSAMINIDASE	6500	6500	6500
KLO25-1045	ALPHA N-ACETYL GALACTOSAMINIDASE	5775	5775	5775
KLO25-1046	ALPHA SUBUNIT	13300	13300	13300
KLO25-1047	ALPHA THALASSEMIA (HBA1 & HBA2) DELETION/DUPLICATION ANALYSIS (M)	8500	8500	8500
KLO25-1048	ALPHA THALASSEMIA ,MUTATION DETECTION -PRENATAL	10800	10800	10800
KLO25-1049	ALPHA THALASSEMIA ,PCR	4200	4200	4200
KLO25-1050	ALPHA THALASSEMIA GENE ANALYSIS (HBA1 & HBA2) (M)	15000	15000	15000
KLO25-1051	ALPHA-1 ANTITRYPSIN , MUTATION PCR	7000	7000	7000
KLO25-1052	ALPHA-MANNOSIDOSIS - LYSOSOMAL STORAGE DISORDER - MAN2B1 GENE ANALYSIS (M)	20000	20000	20000
KLO25-1053	ALPORT SYNDROME GENE PANEL (M)	17600	17600	17600
KLO25-1054	ALPRAZOLAM (ALPRAQUIL, ALPRAX, EUELAX, ZOLDAC)	13100	13100	13100
KLO25-1055	ALSTRÖM SYNDROME - ALMS1 GENE ANALYSIS (M)	16000	16000	16000
KLO25-1056	ALTERNARIA ALTERNATA - SPECIFIC IGG	2300	2300	2300

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1057	ALUMINIUM, DIALYSIS FLUID	2200	2200	2200
KLO25-1058	ALUMINIUM, PLASMA/SERUM	2200	2200	2200
KLO25-1059	ALUMINIUM, SERUM	2200	2200	2200
KLO25-1060	ALUMINUM, URINE (SPOT)	2500	2500	2500
KLO25-1061	ALUMINUN , URINE 24 HOURS	2500	2500	2500
KLO25-1062	AMENORRHOEA / ANDROLOGY SCREEN	1450	1450	1450
KLO25-1063	AMENORRHOEA PROFILE	2750	2750	2750
KLO25-1064	AMH PLUS	2600	2600	2600
KLO25-1065	AMIKACIN	6860	6860	6860
KLO25-1066	AMIKACIN (L)	2480	2480	2480
KLO25-1067	AMINO ACID 24 HOURS URINE	8250	8250	8250
KLO25-1068	AMINO ACID ANALYSIS, GROUP QUALITATIVE, PLASMA	7600	7600	7600
KLO25-1069	AMINO ACID ANALYSIS, QUALITATIVE, CSF	1400	1400	1400
KLO25-1070	AMINO ACID ANALYSIS, QUALITATIVE, ONE DIMENSIONAL, URINE	1400	1400	1400
KLO25-1071	AMINO ACID ANALYSIS, QUALITATIVE, PLASMA	1300	1300	1300
KLO25-1072	AMINO ACID ANALYSIS, QUALITATIVE, TWO DIMENSIONAL, URINE	1400	1400	1400
KLO25-1073	AMINO ACID ANALYSIS, QUANTITATIVE, CSF .	7500	7500	7500
KLO25-1074	AMINO ACID ANALYSIS, QUANTITATIVE, PLASMA (SINGLE)	7500	7500	7500
KLO25-1075	AMINO ACID ANALYSIS, QUANTITATIVE, URINE	8250	8250	8250
KLO25-1076	AMINO ACID ANALYSIS, QUANTITATIVE, URINE (SINGLE)	7500	7500	7500
KLO25-1077	AMINO ACID NON-KETOTIC HYERGLYCINEMIA PANEL	6700	6700	6700
KLO25-1078	AMINO ACID, 45 AMINO ACIDS-FULL PANEL	5600	5600	5600
KLO25-1079	AMINO ACID, 45 AMINO ACIDS-FULL PANEL- URINE & PLASMA	8900	8900	8900
KLO25-1080	AMINO ACID, QUANTITATIVE BLOOD	4200	4200	4200
KLO25-1081	AMINO ACIDS, QUALITATIVE, URINE & PLASMA	2100	2100	2100
KLO25-1082	AMINO LEVULINIC ACID (5 ALA), QUALITATIVE, URINE	4300	4300	4300
KLO25-1083	AMINO LEVULINIC ACID (ALA) QUANTITATIVE, URINE 24 HOURS	4000	4000	4000
KLO25-1084	AMINO LEVULINIC ACID (ALA) QUANTITATIVE, URINE SPOT	4000	4000	4000
KLO25-1085	AMINOLEVULINIC ACID, URINE 24 HOURS	4300	4300	4300
KLO25-1086	AMIODARONE (CADARONE, ALDARONE, PANARONE)	5000	5000	5000
KLO25-1087	AMITRIPTYLINE (INCLUDES METABOLITE NORTRIPTYLINE)	10400	10400	10400
KLO25-1088	AML CATEGORIZATION, PCR	8600	8600	8600
KLO25-1089	AML ETO T(8;21) GENE REARRANGEMENT, PCR QUALITATIVE	4500	4500	4500
KLO25-1090	AML ETO T(8;21) GENE REARRANGEMENT, PCR QUANTITATIVE .	5600	5600	5600
KLO25-1091	AML RISK STRATIFICATION GENE PANEL (M)	36000	36000	36000
KLO25-1092	AMNIOTIC FLUID/ CHORIONIC MICRODELETION PANEL + SUBTELOMERIC (BS)	21600	21600	21600
KLO25-1093	AMNIOTIC FLUID/ CHORIONIC PANEL + SUBTELOMERIC (BS)	24000	24000	24000
KLO25-1094	AMPHETAMINE SCREEN, RANDOM URINE	800	800	800
KLO25-1095	AMPHETAMINES CONFIRMATION, URINE	46500	46500	46500
KLO25-1096	AMPHIPHYSIN (NEURONAL ANTIGEN),ANTIBODY, SERUM	5125	5125	5125
KLO25-1097	AMYLASE, ISOENZYMES	8800	8800	8800
KLO25-1098	AMYLASE, PANCREATIC ALFA	450	450	450
KLO25-1099	AMYLOID -A	3980	3980	3980
KLO25-1100	ANA BY IFA REFLEX ANA BLOT	3000	3000	3000

LAB MEDICINE

Test Code	Test Name	OPD/Economy	IPD Charges Semi Pvt	Pvt
KLO25-1101	ANA BY IMMUNOBLOT	3000	3000	3000
KLO25-1102	ANA POSITIVE REFLEX TO EIA PROFILE	3600	3600	3600
KLO25-1103	ANA REFLEX WITH ENA 18 ANTIGENS	4800	4800	4800
KLO25-1104	ANA REFLEX WITH ENA 23 ANTIGENS	5400	5400	5400
KLO25-1105	ANALYSIS OF RAW DATA (M)	8000	8000	8000
KLO25-1106	ANALYZER 18; SMA 18 TEST PANEL	1500	1500	1500
KLO25-1107	ANALYZER 26; SMA 26 TEST PANEL	2000	2000	2000
KLO25-1108	ANCA (ANTI-NEUTROPHIL CYTOPLASMIC ANTIBODIES) EXTENDED PROFILE IGG	7500	7500	7500
KLO25-1109	ANCA BY IFA REFLEX END POINT TITRE	1850	1850	1850
KLO25-1110	ANCA BY IFA REFLEX MPO/PR3 ANTIBODIES	4200	4200	4200
KLO25-1111	ANDROGEN INDEX	3000	3000	3000
KLO25-1112	ANDROGEN RECEPTOR (AR) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1113	ANDROGEN RECEPTOR (AR) GENE ANALYSIS (M)	20000	20000	20000
KLO25-1114	ANDROGEN RECEPTOR STUDIES	2000	2000	2000
KLO25-1115	ANDROLOGY PANEL	3200	3200	3200
KLO25-1116	ANDROSTENEDIONE	2000	2000	2000
KLO25-1117	ANEMIA OF CHRONIC DISEASE (ACD) PANEL	2700	2700	2700
KLO25-1118	ANEUPLOIDY DETECTION, AMNIOTIC FLUID	6600	6600	6600
KLO25-1119	ANEUPLOIDY DETECTION, BLOOD	6600	6600	6600
KLO25-1120	ANEUPLOIDY DETECTION, POC	6600	6600	6600
KLO25-1121	ANGELMAN SYNDROME	10000	10000	10000
KLO25-1122	ANGIOTENSIN COVERTING ENZYME (ACE),CSF	3050	3050	3050
KLO25-1123	ANGIOTENSIN II	8600	8600	8600
KLO25-1124	ANTERIOR PITUITARY, COMBINED TEST, CAP TEST - PER SPECIMEN	3080	3080	3080
KLO25-1125	ANTI CALCITONIN ANTIBODY	8240	8240	8240
KLO25-1126	ANTI CARDIOLIPIN ANTIBODY (IGA)	900	900	900
KLO25-1127	ANTI CENTROMER ANTIBODY	1500	1500	1500
KLO25-1128	ANTI DNASE B, (ANTIDEOXYRIBONUCLEASE B)	1300	1300	1300
KLO25-1129	ANTI DS DNA ANTIBODY, CRITHIDIA IFA (DOUBLE STANDERED, NATIVE)	2040	2040	2040
KLO25-1130	ANTI DS DNA ANTIBODY, CRITHIDIA IFA IN DILUTIONS	3900	3900	3900
KLO25-1131	ANTI ECHINO COCCUS IGG, HYDATID SEROLOGY	1300	1300	1300
KLO25-1132	ANTI ENDOMYSIAL ANTIBODY IGA IFA	1900	1900	1900
KLO25-1133	ANTI ENDOMYSIAL ANTIBODY, IGA IN DILUTIONS	3700	3700	3700
KLO25-1134	ANTI ENDOMYSIAL ANTIBODY, REFLEX TO TITRE	5000	5000	5000
KLO25-1135	ANTI EPIDERMAL ANTIBODY, ANTI PEMPHIGUS ANTIBODY IIF	2200	2200	2200
KLO25-1136	ANTI EPIDERMAL ANTIBODY, ANTI PEMPHIGUS ANTIBODY, IIF (DILUTION)	4200	4200	4200
KLO25-1137	ANTI GLIADIN ANTIBODIES (IGA)	1900	1900	1900
KLO25-1138	ANTI GLIADIN ANTIBODIES (IgG)	1900	1900	1900
KLO25-1139	ANTI GLIADIN DEAMIDATED ANTIBODIES PANEL-IgA & IgG	3800	3800	3800
KLO25-1140	ANTI GLOMERULAR BASEMENT MEMBRANE ANTIBODY,ANTI GOODPASTURE ANTIBODY,ANTI GBM,IFA	1740	1740	1740
KLO25-1141	ANTI HISTONE ANTIBODIES	1690	1690	1690
KLO25-1142	ANTI HUMAN TISSUE TRANSGLUTAMINASE ANTIBODY (IgG)	8000	8000	8000
KLO25-1143	ANTI IA-2 (INSULINOMA ASSOCIATED ANTIGEN)	5400	5400	5400

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1144	ANTI MITOCHONDRIAL ANTIBDOY, IMMUNOFLUORESCENCE	1900	1900	1900
KLO25-1145	ANTI MITOCHONDRIAL ANTIBODY IN DILUTIONS	3100	3100	3100
KLO25-1146	ANTI NEUTROPHIL CYTOPLASMIC ANTIBODY IN DILUTION	4200	4200	4200
KLO25-1147	ANTI NEUTROPHIL CYTOPLASMIC ANTIBODY, ANCA IIF	2040	2040	2040
KLO25-1148	ANTI NMDA RECEPTOR / ANTI-GLUTAMATE ANTIBODY	7500	7500	7500
KLO25-1149	ANTI NMDA RECEPTOR / ANTI-GLUTAMATE ANTIBODY	6250	6250	6250
KLO25-1150	ANTI NMO (NEUROMYELITIS OPTICA) PANEL, CSF	7800	7800	7800
KLO25-1151	ANTI NMO (NEUROMYELITIS OPTICA) PANEL, SERUM	7800	7800	7800
KLO25-1152	ANTI NUCLEAR ANTIBODY/FACTOR IN DILUTIONS, IIF (HEP-2)	3600	3600	3600
KLO25-1153	ANTI NUCLEAR ANTIBODY/FACTOR, IMMNOFLURORESCENCE, IIF	2400	2400	2400
KLO25-1154	ANTI OVARY ANTIBODIES	3300	3300	3300
KLO25-1155	ANTI OVARY ANTIBODIES TITRES	5600	5600	5600
KLO25-1156	ANTI PARIETAL CELL AB IMMUNOFLURORESCENCE APCA IIF	1600	1600	1600
KLO25-1157	ANTI PARIETAL CELL ANTIBODY IN DILUTIONS, IIF	3200	3200	3200
KLO25-1158	ANTI PHOSPHATIDYLSERINE ANTIBODY IGG	2400	2400	2400
KLO25-1159	ANTI PHOSPHATIDYLSERINE ANTIBODY IGM	2400	2400	2400
KLO25-1160	ANTI PLATELET ANTIBODY (DIRECT)	9660	9660	9660
KLO25-1161	ANTI PLATELET ANTIBODY, INDIRECT, IGG	6260	6260	6260
KLO25-1162	ANTI PTH ANTIBODY	41000	41000	41000
KLO25-1163	ANTI RETICULIN ANTIBODY IGA	6000	6000	6000
KLO25-1164	ANTI SM (SMITH) ANTIBODY	1100	1100	1100
KLO25-1165	ANTI SMOOTH MUSCLE ANTIBODY	1900	1900	1900
KLO25-1166	ANTI SMOOTH MUSCLE ANTIBODY (ASMA) IN DILUTION	3600	3600	3600
KLO25-1167	ANTI SOLUBLE LIVER ANTIGEN - SLA	1400	1400	1400
KLO25-1168	ANTI SPERM ANTIBODY	1100	1100	1100
KLO25-1169	ANTI SS DNA ANTIBODY (SINGLE STANDARD)	2450	2450	2450
KLO25-1170	ANTI SYNTHETASE SYNDROME PROFILE	6500	6500	6500
KLO25-1171	ANTI T3 AUTOANTIBODY	17400	17400	17400
KLO25-1172	ANTI T4 AUTOANTIBODY	13450	13450	13450
KLO25-1173	ANTI TAENIA SOLUIM IGG (CYSTICERCOSIS ANTIBODY)	1400	1400	1400
KLO25-1174	ANTI THROBIN - III FUNCTIONAL	4110	4110	4110
KLO25-1175	ANTI THROBIN- III (ANTIGENIC)	23500	23500	23500
KLO25-1176	ANTI TSH AUTOANTIBODY	14700	14700	14700
KLO25-1177	ANTI VGKC (VOLTAGE GATED POTASSIUM CHANNEL ANTIBODY).SERUM	8400	8400	8400
KLO25-1178	ANTI VGKC ANTIBODY, CSF	8400	8400	8400
KLO25-1179	ANTI VGKC PROFILE, CSF & SERUM	13125	13125	13125
KLO25-1180	ANTIBIOGRAM FOR ANAEROBIC BACTERIA	2800	2800	2800
KLO25-1181	ANTIBODIES TO EXTRACTABLE NUCLEAR ANTIGEN, ENA COMPREHENSIVE PANEL	7600	7600	7600
KLO25-1182	ANTIBODIES TO EXTRACTABLE NUCLEAR ANTIGEN, ENA SCREENING	5640	5640	5640
KLO25-1183	ANTIBODY TO JO-I	1500	1500	1500
KLO25-1184	ANTIBODY TO PCNA (PROLIFEATING CELL NULCEAR ANTIGEN)	14950	14950	14950
KLO25-1185	ANTIBODY TO PM-1, POLYMYSITIS ASSOCIATED ANTIBODY	14600	14600	14600
KLO25-1186	ANTIBODY TO SCL-70, SCLERODERMA ANTIBODY	1300	1300	1300
KLO25-1187	ANTIBODY TO SS-A/RO	1600	1600	1600

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1188	ANTIBODY TO SS-B/LA	1600	1600	1600
KLO25-1189	Anti-ECP (ANTI--EOSINIPHIL CATIONIC PROTEIN)	1640	1640	1640
KLO25-1190	ANTI-IgLON5 ANTIBODY IgG	11000	11000	11000
KLO25-1191	ANTI-MOG (MYELIN OLIGODENDROCYTE GLYCOPROTEIN), CSF	7800	7800	7800
KLO25-1192	ANTI-MOG (MYELIN OLIGODENDROCYTE GLYCOPROTEIN), SERUM	7800	7800	7800
KLO25-1193	ANTIMONY , BLOOD	2860	2860	2860
KLO25-1194	ANTIMONY, URINE 24 HOUR	3000	3000	3000
KLO25-1195	ANTIMONY, URINE SPOT	2860	2860	2860
KLO25-1196	ANTIOXIDANT'S CAPACITY -TOTAL	3000	3000	3000
KLO25-1197	ANTI-PR3 ANTIBODIES	2000	2000	2000
KLO25-1198	ANTI-SYNTHETASE ANTIBODIES (MYOSITIS PROFILE), SERUM	9600	9600	9600
KLO25-1199	ANTITHROMBIN III ACTIVITY	3100	3100	3100
KLO25-1200	ANTITHROMBIN III ANTIGEN	7500	7500	7500
KLO25-1201	ANTITHROMBIN III ANTIGENIC -(USA)	23720	23720	23720
KLO25-1202	ANY 1 MARKER - FLOWCYTOMETRY (SRL)	2800	2800	2800
KLO25-1203	ANY 1 MARKER - IMMUNOHISTOCHEMISTRY	2200	2200	2200
KLO25-1204	ANY 2 MARKERS - IMMUNOHISTOCHEMISTRY	3800	3800	3800
KLO25-1205	ANY 3 MARKERS - IMMUNOHISTOCHEMISTRY	5400	5400	5400
KLO25-1206	ANY 4 MARKERS - IMMUNOHISTOCHEMISTRY	5200	5200	5200
KLO25-1207	ANY 5 MARKERS - IMMUNOHISTOCHEMISTRY	6300	6300	6300
KLO25-1208	ANY 6 MARKERS - IMMUNOHISTOCHEMISTRY	6500	6500	6500
KLO25-1209	ANY 7 MARKERS - IMMUNOHISTOCHEMISTRY	7300	7300	7300
KLO25-1210	ANY 8 MARKERS - IMMUNOHISTOCHEMISTRY	8500	8500	8500
KLO25-1211	APC (ADENOMATOUS POLYPOSIS COLI) GENE ANALYSIS - NGS (M)	30000	30000	30000
KLO25-1212	APC (ADENOMATOUS POLYPOSIS COLI) GENE ANALYSIS - SANGER (M)	15000	15000	15000
KLO25-1213	APLASTIC ANEMIA GENE PANEL (M)	36000	36000	36000
KLO25-1214	APO E GENOTYPING	32400	32400	32400
KLO25-1215	APOLIPOPROTEIN – E	4270	4270	4270
KLO25-1216	AQUAPORIN-4 (NMO) ANTIBODY, SERUM	4500	4500	4500
KLO25-1217	ARGINASE	1900	1900	1900
KLO25-1218	ARGINIINE , QUANTITATIVE	6760	6760	6760
KLO25-1219	ARGININE VASOPRESSIN & OSMOLALITY, BLOOD	13010	13010	13010
KLO25-1220	ARGININE VASOPRESSIN, PLASMA, ANTIDIURETIC HORMONE	13010	13010	13010
KLO25-1221	ARGININE, QUANTITATIVE, URINE	7500	7500	7500
KLO25-1222	ARSENIC, 24 HOUR URINE	3000	3000	3000
KLO25-1223	ARSENIC, BLOOD	3000	3000	3000
KLO25-1224	ARSENIC, URINE RANDOM	3000	3000	3000
KLO25-1225	ARTHROGRYPOSIS & CONGENITAL MYASTHENIC SYNDROME GENE PANEL (M)	25000	25000	25000
KLO25-1226	ARTHROGRYPOSIS AND CONGENITAL (BS)	45600	45600	45600
KLO25-1227	ARYL SULPHATASE A, BLOOD	6240	6240	6240
KLO25-1228	ARYL SULPHATASE B, BLOOD	9260	9260	9260
KLO25-1229	ASCA IgA (L)	1500	1500	1500
KLO25-1230	ASCA IgG (L)	1500	1500	1500
KLO25-1231	ASH/NASH/STEATO PANEL, SERUM	15750	15750	15750

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1232	ASPARGINE SCREEN, SERUM	5950	5950	5950
KLO25-1233	ASPARGINE SCREEN, URINE	5950	5950	5950
KLO25-1234	ASPARTIC ACID SCREEN, SERUM	6760	6760	6760
KLO25-1235	ASPARTIC ACID SCREEN, URINE	6450	6450	6450
KLO25-1236	ASPERGILLUS ANTIBODIES PANEL, IGG & IGM, SERUM	3200	3200	3200
KLO25-1237	ASPERGILLUS ANTIBODIES, IMMUNODIFFUSION	9120	9120	9120
KLO25-1238	ASPERGILLUS ANTIBODY IGG	5500	5500	5500
KLO25-1239	ASPERGILLUS ANTIBODY IGM	5500	5500	5500
KLO25-1240	ASPERGILLUS FUMIGATES DNA DETECTOR	8000	8000	8000
KLO25-1241	ASPERGILLUS FUMIGATUS, IGE	2270	2270	2270
KLO25-1242	ASPERGILLUS FUMIGATUS, IGG	2300	2300	2300
KLO25-1243	ASPERGILLUS FUMIGATUS, SPECIFIC IGG (S)	1800	1800	1800
KLO25-1244	ASPIRIN-RESISTANCE	14200	14200	14200
KLO25-1245	ASS1 GENE MUTATION	45000	45000	45000
KLO25-1246	ASXL1 Mutation analysis	7500	7500	7500
KLO25-1247	ATA- THYROGLOBULIN ANTIBODY, CSF	1700	1700	1700
KLO25-1248	ATAXIA (BS)	44400	44400	44400
KLO25-1249	ATAXIA-TELANGIECTASIA (ATM) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1250	ATAXIA-TELANGIECTASIA (ATM) GENE ANALYSIS (M)	20000	20000	20000
KLO25-1251	ATRIAL NATRIURETIC FACTOR	12000	12000	12000
KLO25-1252	ATRX GENE ANALYSIS (M)	20000	20000	20000
KLO25-1253	AURAMINE STAIN	100	100	100
KLO25-1254	AUTISM GENE PANEL (BS)	45600	45600	45600
KLO25-1255	AUTO IMMUNE CEREBELLAR ATAXIA PANEL-USA	51500	51500	51500
KLO25-1256	AUTO IMMUNE ENCEPHALITIS PANEL	21600	21600	21600
KLO25-1257	AUTO IMMUNE ENCEPHALITIS PANEL -CSF	21600	21600	21600
KLO25-1258	AUTO IMMUNE ENCEPHALITIS PANEL, SERUM & CSF	36700	36700	36700
KLO25-1259	AUTO IMMUNE HEPATITIS PANEL PLUS	5700	5700	5700
KLO25-1260	AUTOGEN PANEL	9200	9200	9200
KLO25-1261	AUTOGEN PLUS PANEL	10800	10800	10800
KLO25-1262	AUTOIMMUNE BULLOUS DERMATOSES PROFILE IGG	13000	13000	13000
KLO25-1263	AUTOIMMUNE ENCEPHALITIS PANEL -1 (M)	22000	22000	22000
KLO25-1264	AUTOIMMUNE ENCEPHALITIS PANEL -2 (M)	30450	30450	30450
KLO25-1265	AUTOIMMUNE INTERSTITIAL LUNG DISEASES (AUTOIMMUNE ILD) PANEL	9700	9700	9700
KLO25-1266	Autopsy Panel (With Altum 750K)	25000	25000	25000
KLO25-1267	Autopsy Panel (With Altum)	20000	20000	20000
KLO25-1268	Autopsy Panel (With CES)	25000	25000	25000
KLO25-1269	AUTOSOMAL DOMINANT CEREBELLAR ATAXIA EXTENDED PROFILE	27000	27000	27000
KLO25-1270	AVIAN ANTIGEN PANEL	2200	2200	2200
KLO25-1271	B THALASSAEMIA COUPLE [7 COMMON (BS)	6000	6000	6000
KLO25-1272	B THALASSAEMIA SINGLE [16 MUTATIONS] (BS)	7200	7200	7200
KLO25-1273	B THALASSAEMIA SINGLE [7 MUTATIONS] (BS)	4200	4200	4200
KLO25-1274	BABESIA ANTIBODY IGG & IGM	7200	7200	7200
KLO25-1275	BACTERIAL PNEUOMINAE PANEL	7800	7800	7800

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1276	BACTERIAL VAGINOSIS (BV) , RAPID ASSAY	700	700	700
KLO25-1277	BARBITURATES CONFIRMATION, URINE	46500	46500	46500
KLO25-1278	BARBITURATES, URINE	800	800	800
KLO25-1279	BARDET-BIEDL SYNDROME GENE PANEL (M)	20800	20800	20800
KLO25-1280	BARTONELLA HENSELAE ANTIBODIES (IGG,IGM) TITER	4440	4440	4440
KLO25-1281	BARTTER SYNDROME GENE PANEL (M)	25000	25000	25000
KLO25-1282	BASAL GANGLION ANTIBODY	4000	4000	4000
KLO25-1283	BASIC TRANSPLANT VIRAL INFECTI	12000	12000	12000
KLO25-1284	B-CELL CLONALITY PANEL (IGH, IGK), PCR	23370	23370	23370
KLO25-1285	B-CELL GENE REARRANGEMENT, PC	19200	19200	19200
KLO25-1286	B-CELL RECEPTOR IGH GENE REARRANGEMENT, PCR	15600	15600	15600
KLO25-1287	B-CELL RECEPTOR IGK GENE REARRANGEMENT, PCR	12350	12350	12350
KLO25-1288	BCR/ABL IS - INTERNATIONAL SCALE (Philadelphia Chromosome)	9000	9000	9000
KLO25-1289	BCR-ABL 1 KINASE DOMAIN MUTATION ANALYSIS	10000	10000	10000
KLO25-1290	BCR-ABL -BONE MARROW	4980	4980	4980
KLO25-1291	BCR-ABL PCR QUALITATIVE	3300	3300	3300
KLO25-1292	BCR-ABL PCR QUANTITATIVE	6500	6500	6500
KLO25-1293	BCR-ABL QUALITATIVE GENE FUSION ANALYSIS (MAJOR TRANSCRIPT) (M)	3200	3200	3200
KLO25-1294	BCR-ABL QUANTITATIVE (INTERNATIONAL SCALE) GENE FUSION ANALYSIS (MAJOR TRANSCRIPT) (M)	6500	6500	6500
KLO25-1295	BCR-ABL QUANTITATIVE GENE FUSION ANALYSIS (MAJOR & MINOR TRANSCRIPTS) (M)	7000	7000	7000
KLO25-1296	BCR-ABL QUANTITATIVE GENE FUSION ANALYSIS (MAJOR TRANSCRIPT) (M)	6500	6500	6500
KLO25-1297	BCR-ABL QUANTITATIVE, MRD MONITOR	6500	6500	6500
KLO25-1298	BCR-abl TRANSCRIPT QUANTIFICATION (Philadelphia Chromosome	6500	6500	6500
KLO25-1299	BECKWITH-WIEDEMANN SYNDROME DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1300	BENIGN INFANTILE EPILEPSY GENE PANEL (BS)	45000	45000	45000
KLO25-1301	BENIGN INFANTILE EPILEPSY GENE PANEL (M)	18000	18000	18000
KLO25-1302	BENZODIAZEPINE SCREEN, RANDOM URINE. (L)	800	800	800
KLO25-1303	BENZODIAZEPINES CONFIRMATION, URINE	46500	46500	46500
KLO25-1304	BETA 2 AMINOISOBUTYRIC ACID, URINE	1500	1500	1500
KLO25-1305	BETA 2 AMINOISOBUTYRIC ACID, SERUM	1500	1500	1500
KLO25-1306	BETA 2 CROSSLAPS (CTX-1),PLASMA	1800	1800	1800
KLO25-1307	BETA 2 GLYCOPROTEIN IgA	1000	1000	1000
KLO25-1308	BETA 2 GLYCOPROTEIN panel	7660	7660	7660
KLO25-1309	BETA 2 MICROGLOBULIN, CSF	1750	1750	1750
KLO25-1310	BETA 2 MICROGLOBULINE, RANDOM URINE	1750	1750	1750
KLO25-1311	BETA -2 TRANSFERRIN CARBOHYDRATE -GEL ELECTROPHORESIS	6240	6240	6240
KLO25-1312	BETA 2 TRANSFERRIN CARBOHYDRATE RESISTANT FLUID	33050	33050	33050
KLO25-1313	BETA GALACTOCEREBROSIDASE	8530	8530	8530
KLO25-1314	BETA GALACTOSIDASE	5850	5850	5850
KLO25-1315	BETA GLUCOSIDASE	5850	5850	5850
KLO25-1316	BETA HEXOSAMINIDASE A	7800	7800	7800
KLO25-1317	BETA HEXOSAMINIDASE T	7800	7800	7800
KLO25-1318	BETA MANNOSIDASE	6240	6240	6240
KLO25-1319	BETA THALASSEMIA (5 COMMON MUTATION), BLOOD- PCR	18500	18500	18500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1320	BETA THALASSEMIA (COMPLETE SET OF 21 LOCI), AMNIOTIC FLUID- PCR	15000	15000	15000
KLO25-1321	BETA THALASSEMIA (COMPLETE SET OF 21 LOCI)-BLOOD PCR	8000	8000	8000
KLO25-1322	BETA THALASSEMIA (HBB) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1323	BETA THALASSEMIA (HBB) GENE ANALYSIS (M)	10000	10000	10000
KLO25-1324	BETA THALASSEMIA , BETA GLOBIN (HBB)	9590	9590	9590
KLO25-1325	BETA THALASSEMIA GENE SEQUENCING -PRENATAL (G)	10900	10900	10900
KLO25-1326	BETA THALASSEMIA MUTATION SCREENING TEST (G)	4550	4550	4550
KLO25-1327	BETA THALASSEMIA, (23 MUTATIONS), CVS/AMNIOTIC FLUID	10500	10500	10500
KLO25-1328	BETA-2 MICROGLOBULINE	1400	1400	1400
KLO25-1329	BETA-2-MICROGLOBULIN, 24 HOURS URINE	1400	1400	1400
KLO25-1330	BETA-CROSS	4000	4000	4000
KLO25-1331	BETA-THALASSEMIA - 5 COMMON MUTATIONS (Prenatal sample)	5000	5000	5000
KLO25-1332	B-GLOBIN GENE SEQUENCING	6500	6500	6500
KLO25-1333	BICARBONATE URINE	10750	10750	10750
KLO25-1334	BILIRUBIN -FRACTIONED	210	210	210
KLO25-1335	BIOAGILE 1	1620	1620	1620
KLO25-1336	BIOAGILE 2	8990	8990	8990
KLO25-1337	BIOAGILE 3	4590	4590	4590
KLO25-1338	BIOTINIDASE	4100	4100	4100
KLO25-1339	BIOTINIDASE DEFICIENCY (BTD) GENE ANALYSIS (M)	16000	16000	16000
KLO25-1340	BIOTINIDASE NEONATAL	760	760	760
KLO25-1341	BISMUTH, 24 HOUR URINE	6900	6900	6900
KLO25-1342	BISMUTH, BLOOD	2860	2860	2860
KLO25-1343	BISMUTH, RANDOM URINE	6900	6900	6900
KLO25-1344	BK POLYOMA VIRUS DETECTION, URINE, PCR	4500	4500	4500
KLO25-1345	BK VIRUS -QUALITATIVE PCR	4200	4200	4200
KLO25-1346	BK VIRUS- QUANTITATIVE PCR	5700	5700	5700
KLO25-1347	BK/JC QUALITATIVE DETECTION (BS)	7200	7200	7200
KLO25-1348	BLADDER CANCER - SENSITIVITY TO MTOR INHIBITORS (HOT SPOT) (M)	36000	36000	36000
KLO25-1349	BLADDER CANCER UROTHELIAL CARCINOMA	14560	14560	14560
KLO25-1350	BLASTOMYCES ANTIBODY	7000	7000	7000
KLO25-1351	Blood group Unexpected antibody screen Blood	1500	1500	1500
KLO25-1352	BLOOD LYMPHO CULTURE	3600	3600	3600
KLO25-1353	BNP - B TYPE NATRIURETIC PEPTIDE	1900	1900	1900
KLO25-1354	BODY FLUID LEUKEMIA/LYMPHOMA SCREEN – FLOWCYTOMETRY (M)	11000	11000	11000
KLO25-1355	BOH (BAD OBSTERTRIC HISTORY) MAXI PANEL	14720	14720	14720
KLO25-1356	BOH (BAD OBSTETRIC HISTORY) EXTENDED PANEL	5900	5900	5900
KLO25-1357	BONE AND JOINT DISEASE PANEL, SERUM	3500	3500	3500
KLO25-1358	BONE FORMATION MARKERS	6540	6540	6540
KLO25-1359	BONE MARROW FAILURE GENE PANEL (M)	50000	50000	50000
KLO25-1360	BONE MARROW,MPO STAIN	450	450	450
KLO25-1361	BONE MARROW,PAS STAIN	490	490	490
KLO25-1362	BONE MARROW,RETICULIN STAIN	1500	1500	1500
KLO25-1363	BONE RESORPTION MARKER	4360	4360	4360

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1364	BORDETELLA PERTUSSIS-IGG ANTIBODIES, SERUM	2700	2700	2700
KLO25-1365	BORON, SERUM/PLASMA	7610	7610	7610
KLO25-1366	BORRELIA BURGDORFERI (LYME) IGG & IGM BY WESTERN BLOT, SERUM	20250	20250	20250
KLO25-1367	BORRELIA BURGDORFERI (LYME) IGG ANTIBODIES, SERUM, EIA	2730	2730	2730
KLO25-1368	BORRELIA BURGDORFERI (LYME) IGG BY IMMUNOBLOT	7420	7420	7420
KLO25-1369	BORRELIA BURGDORFERI (LYME) IGM ANTIBODIES, SERUM, EIA	2730	2730	2730
KLO25-1370	BORRELIA BURGDORFERI (LYME) IGM BY WESTERN BLOT, SERUM , IMMUNOBLOT	7420	7420	7420
KLO25-1371	BORRELIA BURGDORFERI DNA, PCR CSF OR SYNOVIAL FLUID	16300	16300	16300
KLO25-1372	BRAF GENE ANALYSIS - 2 EXONS (11 & 15) (M)	9000	9000	9000
KLO25-1373	BRAF MUTATION ANALYSIS	6200	6200	6200
KLO25-1374	BRAF V600E IHC ANALYSIS (M)	5000	5000	5000
KLO25-1375	BRAF V600E MUTATION ANALYSIS (M)	6000	6000	6000
KLO25-1376	BRAF V600E MUTATION DETECTION (HAIRY CELL LEUKEMIA BLOOD)	6500	6500	6500
KLO25-1377	BRCA 1, BLOOD, PCR	13000	13000	13000
KLO25-1378	BRCA 2, BLOOD, PCR	15000	15000	15000
KLO25-1379	BRCA1 & BRCA2 DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-1380	BRCA1 & BRCA2 GENE ANALYSIS (M)	30000	30000	30000
KLO25-1381	BRCA1 & BRCA2 MUTATION ADVANCED PANEL	23800	23800	23800
KLO25-1382	BRCA1 & BRCA2 MUTATION DRUG PROFILING PANEL	23800	23800	23800
KLO25-1383	BRCA1 GENE ANALYSIS (M)	24000	24000	24000
KLO25-1384	BRCA1&2 - CONFIRM – NGS WITH SIMULTANEOUS MLPA (M)	40000	40000	40000
KLO25-1385	BRCA1&2 - REFLEX – NGS FOLLOWED BY MLPA (IF NGS IS NEGATIVE) (M)	36000	36000	36000
KLO25-1386	BRCA1&BRCA2 COMPREHENSIVE PANEL	33000	33000	33000
KLO25-1387	BRCA1&BRCA2 MUTATION SCREEN	23800	23800	23800
KLO25-1388	BRCA2 GENE ANALYSIS (M)	24000	24000	24000
KLO25-1389	BREAST AND OVARIAN CANCER PANEL (BS)	30000	30000	30000
KLO25-1390	BREAST CANCER - NGS THERANOSTIC PANEL (HOT SPOT) (M)	36000	36000	36000
KLO25-1391	BREAST CANCER PANEL (BS)	30000	30000	30000
KLO25-1392	BREAST CANCER PANEL 1	3800	3800	3800
KLO25-1393	BREAST CANCER PANEL 2	4400	4400	4400
KLO25-1394	BREAST CANCER PANEL 3	4600	4600	4600
KLO25-1395	BREAST CANCER PANEL -5	8000	8000	8000
KLO25-1396	BREAST CANCER PANEL-4	6800	6800	6800
KLO25-1397	BREAST CANCER PANEL-6	11000	11000	11000
KLO25-1398	BREAST CANCER PROFILE-II (ERPR,HER2NEU,P53,KI67)	7000	7000	7000
KLO25-1399	BREAST CANCER PROGNOSIS TUMOR PROFILE -1A	5500	5500	5500
KLO25-1400	BREAST CANCER PROGNOSIS TUMOR PROFILE -2A	6300	6300	6300
KLO25-1401	BREAST CANCER PROGNOSIS TUMOR PROFILE -3A	6300	6300	6300
KLO25-1402	BREAST CANCER PROGNOSIS TUMOR PROFILE -4A	7200	7200	7200
KLO25-1403	BREAST CANCER PROGNOSIS TUMOR PROFILE -5A	8000	8000	8000
KLO25-1404	BREAST CANCER PROGNOSIS TUMOR PROFILE -6A	11000	11000	11000
KLO25-1405	BREAST EVALUATION PANEL	3300	3300	3300
KLO25-1406	BREAST HORMONE RECEPTOR PANEL;	3100	3100	3100
KLO25-1407	BREAST METASTATIC MARKER	4000	4000	4000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1408	BREAST MONITOR PANEL	2200	2200	2200
KLO25-1409	BREAST PROGNOSTIC/PREDICTIVE IHC1 PANEL (M)	2000	2000	2000
KLO25-1410	BREAST PROGNOSTIC/PREDICTIVE IHC2 PANEL (M)	2000	2000	2000
KLO25-1411	BREAST PROGNOSTIC/PREDICTIVE IHC3 PANEL (M)	3500	3500	3500
KLO25-1412	BREAST PROGNOSTIC/PREDICTIVE IHC4 PANEL (M)	4800	4800	4800
KLO25-1413	BREAST TREATMENT PANEL	3500	3500	3500
KLO25-1414	BROWN VIALETTO–VAN LAERE SYNDROME (M)	17000	17000	17000
KLO25-1415	BRUCELLA ANTIBODIES	1850	1850	1850
KLO25-1416	BRUCELLA ANTIBODIES, (IGG,IGM)-EIA	2500	2500	2500
KLO25-1417	BRUCELLA ANTIBODIES, REFLEX TO AGGLUTINATION	4390	4390	4390
KLO25-1418	BRUCELLA ANTIBODY BRUCELLA AGGLUTINATION TEST .(L)	800	800	800
KLO25-1419	BRUCELLA -IGG ANTIBODY, SERUM	1000	1000	1000
KLO25-1420	BRUCELLA-IGM ANTIBODY, SERUM	1000	1000	1000
KLO25-1421	B-THALASSEMIA (ALL EXONS).(L)	8000	8000	8000
KLO25-1422	B-THALASSEMIA (PARENT & FETUS) 7 COMMON MUTATION -(L)	15000	15000	15000
KLO25-1423	B-THALASSEMIA : PRENATAL DIAGNOSIS KNOWN MUTATIONS.(L)	7500	7500	7500
KLO25-1424	B-THALASSEMIA PACKAGE (MUTATION ANALYSIS ON COUPLES BLOOD SAMPLES + PRENATAL DIAGNOSI	15000	15000	15000
KLO25-1425	BUCCAL SMEAR- BARR BODY, CELL CULTURE	3500	3500	3500
KLO25-1426	BUCCAL SMEAR FOR BARR BODY (BARR BODY)	440	440	440
KLO25-1427	BULLOUS PEMPHIGOID 180 VESICULOBULLOUS DISORDERS	3500	3500	3500
KLO25-1428	BULLOUS PEMPHIGOID 230 VESICULOBULLOUS DISORDERS	3500	3500	3500
KLO25-1429	BUPROPION	13700	13700	13700
KLO25-1430	BUPROPION OR METABOLITE SERUM	19190	19190	19190
KLO25-1431	BUSULFAN, SERUM/PLASMA	24470	24470	24470
KLO25-1432	C.DIPTHERIA TOXIN A & B , PCR	4000	4000	4000
KLO25-1433	C1 ESTERASE INHIBITOR, FUNCTIONAL ACTIVITY C1 INACTIVAT	6100	6100	6100
KLO25-1434	C1 ESTERASE INHIBITOR, PROEIN QUANTITATION, C1 INACIVATOR	2650	2650	2650
KLO25-1435	C1 Q COMPLEMENT COMPONENT	5900	5900	5900
KLO25-1436	C2 COMPLEMENT COMPONENT	6500	6500	6500
KLO25-1437	C3 TISSUE	1800	1800	1800
KLO25-1438	C5 COMPLEMENT COMPONENT	7210	7210	7210
KLO25-1439	C6 COMPLEMENT COMPONENT	7530	7530	7530
KLO25-1440	C7 COMPLEMENT COMPONENT	7250	7250	7250
KLO25-1441	C8 COMPLEMENT COMPONENT	7250	7250	7250
KLO25-1442	C8ORF37 GENE SEQUENCING (M)	17000	17000	17000
KLO25-1443	C9 COMPLEMENT COMPONENT	7250	7250	7250
KLO25-1444	C9ORF72 (FTD) DNA ,TEST, USA	42340	42340	42340
KLO25-1445	CA 242, SERUM	2500	2500	2500
KLO25-1446	CA 27.29 & CA 15.3 BREAST CANCER MARKERS PANEL	8600	8600	8600
KLO25-1447	CA 27.29, BREAST CANCER MARKER	9300	9300	9300
KLO25-1448	CA -72.4 GASTRIC CANCER MARKER	1600	1600	1600
KLO25-1449	CA CYFRA 21-1, LUNG CANCER MARKER	2900	2900	2900
KLO25-1450	CADMIUM, 24 HOUR URINE	3500	3500	3500
KLO25-1451	CADMIUM, BLOOD	3500	3500	3500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1452	CADMIUM, RANDOM URINE	3500	3500	3500
KLO25-1453	CAFFEINE (USA)	6590	6590	6590
KLO25-1454	CAH (CONGENITAL ADRENAL HYPERPLASIA) (11MUTATIONS) (BS)	12480	12480	12480
KLO25-1455	CAH PANEL (21 COMMON MUTATION)	25170	25170	25170
KLO25-1456	CAH PANEL (21 RARE MUTATION)	24840	24840	24840
KLO25-1457	CAH PANEL 6 (STAR DEFICIENCY)	9750	9750	9750
KLO25-1458	CAH PANEL 6B , COMPREHENSIVE	15580	15580	15580
KLO25-1459	CAH PANEL 8	23140	23140	23140
KLO25-1460	CAH PANEL 9	11830	11830	11830
KLO25-1461	CAH/CH..PANEL	6000	6000	6000
KLO25-1462	CAH/CH/GALACTOSEMIA/CYSTIC FIBROSIS/G6PD	1550	1550	1550
KLO25-1463	CALCITONIN	2150	2150	2150
KLO25-1464	CALCITONIN SERUM	2300	2300	2300
KLO25-1465	CALCIUM - PENTAGASTRIN STIMULATION TEST FOR CALCITONIN	11700	11700	11700
KLO25-1466	CALPROTECTIN, FECAL	3200	3200	3200
KLO25-1467	CALR MUTATION DETECTION	4900	4900	4900
KLO25-1468	CALRETICULIN - GENE MUTATION	6540	6540	6540
KLO25-1469	CALRETICULIN (CALR) EXON 9 MUTATION	6540	6540	6540
KLO25-1470	CAMPATH-1 H SENSITIVITY (CD 52)	24720	24720	24720
KLO25-1471	CAMPYLOBACTER ANTIGEN DETECTION - STOOL	1750	1750	1750
KLO25-1472	CAMPYLOBACTER SPECIES- CULTURE	1400	1400	1400
KLO25-1473	CAMPYLOBACTOR JEJUNI ANTIBODY	3390	3390	3390
KLO25-1474	CAN ASSIST BREAST	65000	65000	65000
KLO25-1475	CANAVAN DISEASE	3200	3200	3200
KLO25-1476	CANAVAN DISEASE (ASPA) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1477	CANAVAN DISEASE (ASPA) GENE ANALYSIS (M)	20000	20000	20000
KLO25-1478	C-ANCA SPECIFIC	2200	2200	2200
KLO25-1479	CANCER 50 GENE PANEL	32400	32400	32400
KLO25-1480	CANCER BREAST COMPRHENSIVE PANEL	7600	7600	7600
KLO25-1481	CANCER DETECTION PROFILE-FEMALE	8500	8500	8500
KLO25-1482	CANCER DETETION PROFILE-MALE	7200	7200	7200
KLO25-1483	CANCER GENE ANY 3 MARKERS, NGS	14600	14600	14600
KLO25-1484	CANCER HOTSPOT PANEL	45500	45500	45500
KLO25-1485	CANCER TARGETED GENE PANEL, GASTROINTESTINAL	21600	21600	21600
KLO25-1486	CANCER TARGETED GENE PANEL, CNS TUMOR	21600	21600	21600
KLO25-1487	CANCER TARGETED GENE PANEL, COLON/COLORECTAL	16200	16200	16200
KLO25-1488	CANCER TARGETED GENE PANEL, LUNG	29700	29700	29700
KLO25-1489	CANDIDA ALBICANS (IGG,IGM,IGA)	3700	3700	3700
KLO25-1490	CANDIDA ALBICANS , PCR	7000	7000	7000
KLO25-1491	CANDIDA ALBICANS ANTIBODIES, SERUM	3700	3700	3700
KLO25-1492	CANDIDA ALBICANS DETECTION, PCR	6000	6000	6000
KLO25-1493	CANDIDA ALBICANS-DNA (CSF,)- PCR	8000	8000	8000
KLO25-1494	CANDIDA ALBICANS-DNA (BLOOD,)- PCR	8000	8000	8000
KLO25-1495	CANDIDA ALBICANS-DNA (BODY FLUIDS)-PCR	8000	8000	8000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1496	CANDIDA ALBICANS-DNA (SPUTUM)-PCR	8000	8000	8000
KLO25-1497	CANDIDA ALBICANS-DNA (TISSUE)-PCR	8000	8000	8000
KLO25-1498	CANDIDA ANTIBODY IGG	1460	1460	1460
KLO25-1499	CANDIDA ANTIBODY IGM	1460	1460	1460
KLO25-1500	CANDIDA ANTIGEN	5900	5900	5900
KLO25-1501	CANDIDA MANNAN ANTIGEN, SERUM	5900	5900	5900
KLO25-1502	CANNABINOIDS (DELTA-9-THC METABOLITES) / MARIJUANA CONFIRMATION, URINE	46500	46500	46500
KLO25-1503	CANNABINOIDS (L)	750	750	750
KLO25-1504	CANNABINOIDS, MARIJUANA, SCREEN, RANDOM URINE	1200	1200	1200
KLO25-1505	CANTU SYNDROME (ABCC9) GENE SEQUENCING (M)	14000	14000	14000
KLO25-1506	CAPECITABINE INDUCED TOXICITY, DPD-PCR	16000	16000	16000
KLO25-1507	CARBAMAZEPINE DRUG ASSAY Tegretol Mezetol Tarbatol	900	900	900
KLO25-1508	CARBAMAZEPINE, FREE	6080	6080	6080
KLO25-1509	CARBAPEN- R- XPERT	9700	9700	9700
KLO25-1510	CARBOHYDRATE DEFICIENT TRANSFERRIN (CDT)	2000	2000	2000
KLO25-1511	CARBON DIOXIDE,SERUM	260	260	260
KLO25-1512	CARBOXYHEMOGLOBIN,BLOOD	8970	8970	8970
KLO25-1513	CARDIAC CHANNELOPATHY GENE PANEL (BS)	42000	42000	42000
KLO25-1514	CARDIAC CHANNELOPATHY GENE PANEL (M)	17000	17000	17000
KLO25-1515	CARDIAC/MYOCARDIAL INFARCTION PANEL	3500	3500	3500
KLO25-1516	CARDIOLIPIN ANTIBODIES PANEL *IGG *IGA *IGM	2600	2600	2600
KLO25-1517	CARDIOMETABOLIC PANEL	3200	3200	3200
KLO25-1518	CARDIOMYOPATHY GENE PANEL (BS)	45600	45600	45600
KLO25-1519	CARDIOMYOPATHY GENE PANEL (M)	25000	25000	25000
KLO25-1520	CARDIOMYOPATHY PREDISPOSITION -MYBPC3 (25BP DELETION) (M)	10000	10000	10000
KLO25-1521	CARDIOPRO DRUG GENOTYPING - 15 DRUGS	7000	7000	7000
KLO25-1522	CARNEY COMPLEX (PRKAR1A) GENE ANALYSIS (M)	30000	30000	30000
KLO25-1523	CARNITINE	4300	4300	4300
KLO25-1524	CAROTENE	7600	7600	7600
KLO25-1525	CARRIER SCREENING - GOLD [MLPA (DMD, SMA, CYP21A2) + 500 GENES NGS] (M)	39000	39000	39000
KLO25-1526	CARRIER SCREENING - PLATINUM [MLPA (DMD, SMA, CYP21A2) + > 2000 GENES INCLUDED IN CLINICAL EX	65000	65000	65000
KLO25-1527	CARRIER SCREENING - SILVER [MLPA (DMD, SMA, CYP21A2) + 100 GENES NGS] (M)	33000	33000	33000
KLO25-1528	CARRIER SCREENING (420 GENES)	22000	22000	22000
KLO25-1529	CARTILAGE OLIGOMETRIC MATRIX PROTEIN	6000	6000	6000
KLO25-1530	CATARACT GENE PANEL (CONGENITAL/DEVELOPMENTAL) (M)	25000	25000	25000
KLO25-1531	CATECHOLAMINES & VMA, 24-HOUR URINE	8400	8400	8400
KLO25-1532	CATECHOLAMINES PLASMA	7800	7800	7800
KLO25-1533	CATECHOLAMINES, 24 HOUR URINE	4900	4900	4900
KLO25-1534	CATECHOLAMINES, PLASMA, CLONIDINE SUPRESSION TEST	7850	7850	7850
KLO25-1535	CATECHOLAMINES, RANDOM URINE	4900	4900	4900
KLO25-1536	CCD3 - FLOWCYTOMETRY	5300	5300	5300
KLO25-1537	CCD79A - FLOWCYTOMETRY	2300	2300	2300
KLO25-1538	CD 21 - IMMUNOHISTOCHEMISTRY	1900	1900	1900
KLO25-1539	CD 5 - IMMUNOHISTOCHEMISTRY	2200	2200	2200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1540	CDSA	31000	31000	31000
KLO25-1541	CDSA 2.0 RANDOM	41000	41000	41000
KLO25-1542	CDSA WITH PARASITOLOGY	34500	34500	34500
KLO25-1543	CDX2 - IMMUNOHISTOCHEMISTRY	2300	2300	2300
KLO25-1544	CEBPA GENE SEQUENCING (M)	15000	15000	15000
KLO25-1545	CEBPA MUTATION DETECTION	10000	10000	10000
KLO25-1546	CEL/HES (CHRONIC EOSINOPHILIC LEUKEMIA/ HYPER EOSINOPHILIC SYNDROME) DIAGNOSTIC AND PROG	36000	36000	36000
KLO25-1547	CELEIAC DISEASE, PROFILE	8000	8000	8000
KLO25-1548	CELIAC DISEASE SCREENING PANEL	1200	1200	1200
KLO25-1549	CENTROMERE ANTIBODY	1500	1500	1500
KLO25-1550	CENTROMERE B, ANTIBODY	2550	2550	2550
KLO25-1551	CEP290 DELETION/DUPLICATION ANALYSIS (M)	25000	25000	25000
KLO25-1552	CEPHALOSPORIN	4400	4400	4400
KLO25-1553	CERULOPLASMIN	1200	1200	1200
KLO25-1554	CERVICAL CANCER -IHC PANEL	5800	5800	5800
KLO25-1555	CERVICAL SCREENING (L)	1700	1700	1700
KLO25-1556	CERVICAL SCREENING -1	2750	2750	2750
KLO25-1557	CERVICAL SCREENING -2	2900	2900	2900
KLO25-1558	CERVICAL SCREENING -3	4900	4900	4900
KLO25-1559	CFTR FULL GENE SEQUENCING (LI)	40000	40000	40000
KLO25-1560	CFTR Gene MLPA	12000	12000	12000
KLO25-1561	CFTR SEQUENCING (G)	28600	28600	28600
KLO25-1562	CHALMYDIA ANTIGEN RAPID	1200	1200	1200
KLO25-1563	CHALMYDIA TRACHOMATIC IgM	1200	1200	1200
KLO25-1564	CHARCOT-MARIE-TOOTH AND 1A/HNPP (PMP22, COXI0, TEKT3) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1565	CHARCOT-MARIE-TOOTH AND SENSORY NEUROPATHIES GENE PANEL (M)	25000	25000	25000
KLO25-1566	CHARCOT-MARIE-TOOTH PMP22 DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1567	CHARCOT-MARIE-TOOTH TYPE 4 (EGR2, GDAP1, NEFL, PRX) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1568	CHARCOT-MARIE-TOOTH TYPE 4C (SH3TC2) DELETION/DUPLICATION ANALYSIS (M)	20000	20000	20000
KLO25-1569	CHEDIAK-HIGASHI SYNDROME (LYST) GENE ANALYSIS (M)	20000	20000	20000
KLO25-1570	CHICKPEA -IgE	3090	3090	3090
KLO25-1571	CHIKANGUNIA, PCR -QUALITATIVE	1500	1500	1500
KLO25-1572	CHIKANGUNIA, DNA -BLOOD PCR	5000	5000	5000
KLO25-1573	CHIKANGUNIA, IGM, CSF	1000	1000	1000
KLO25-1574	CHIKUNGUNYA ANTIBODIES WITH REFLEX(ES) TO TITER	6580	6580	6580
KLO25-1575	CHIMERISM , SPLIT CELL ANALYSIS	8600	8600	8600
KLO25-1576	CHIMERISM PRE-ENGRAFTMENT, DONE & RECIPIENT	10800	10800	10800
KLO25-1577	CHIMERISM TESTING (M)	10000	10000	10000
KLO25-1578	CHIMERISM, POST-ENGRAFTMENT	6200	6200	6200
KLO25-1579	CHIMERISM, PRE-ENGRAFTMENT	6200	6200	6200
KLO25-1580	CHITOTRIOSIDASE, PLASMA	5400	5400	5400
KLO25-1581	CHLAMYDIA / CHLAMYDOPHILA SEROLOGY	25200	25200	25200
KLO25-1582	CHLAMYDIA & CHLAMYDOPHILA ANTIBODY PANEL 3, IGM, IGG AND IGA	17520	17520	17520
KLO25-1583	CHLAMYDIA ANTIGEN,RAPID	1200	1200	1200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1584	CHLAMYDIA GROUP ANTIBODY	6600	6600	6600
KLO25-1585	CHLAMYDIA IGA ANTIBODY, SERUM	2020	2020	2020
KLO25-1586	CHLAMYDIA IGG ANTIBODY PANEL *CHLAMYDIA TRACHOMATIS, IGG *CHLAMYDIA PNEUMONIAE, IGG	1400	1400	1400
KLO25-1587	CHLAMYDIA IGM ANTIBODY, SERUM	4110	4110	4110
KLO25-1588	CHLAMYDIA PNEUMONIAE ANTIBODY PANEL (IGG/IGM/IGA)	7720	7720	7720
KLO25-1589	CHLAMYDIA PNEUMONIAE IgA	2400	2400	2400
KLO25-1590	CHLAMYDIA PNEUMONIAE IGG (L)	710	710	710
KLO25-1591	CHLAMYDIA PNEUMONIAE IGG ANTIBODY	2020	2020	2020
KLO25-1592	CHLAMYDIA PNEUMONIAE IgM	2400	2400	2400
KLO25-1593	CHLAMYDIA PSITTACI ANTIBODY PANEL (IGG/IGM/IGA)	4630	4630	4630
KLO25-1594	CHLAMYDIA QUALITATIVE (BS)	3000	3000	3000
KLO25-1595	CHLAMYDIA SPECIATION	4200	4200	4200
KLO25-1596	CHLAMYDIA TRACHOMATIS ANTIBODY PANEL	4630	4630	4630
KLO25-1597	CHLAMYDIA TRACHOMATIS IgA	1200	1200	1200
KLO25-1598	CHLAMYDIA TRACHOMATIS IgG	800	800	800
KLO25-1599	CHLAMYDIA TRACHOMATIS, DNA, PCR	3500	3500	3500
KLO25-1600	CHLAMYDIA TRACHOMATIS, FLUID	3500	3500	3500
KLO25-1601	CHLAMYDIA TRACHOMATIS, URINE	3500	3500	3500
KLO25-1602	CHLAMYDIA TRACHOMATIS, VAGINAL SWAB	3500	3500	3500
KLO25-1603	CHLAMYDIA TRACOMATIS AND NEISSERIA GONORRHOEAE, PCR QUALITATIVE	5100	5100	5100
KLO25-1604	CHLAMYDIA TRCHOMATIS IGM	1000	1000	1000
KLO25-1605	CHLODIAZEPOXIDE	10380	10380	10380
KLO25-1606	CHOLINESTERASE	540	540	540
KLO25-1607	CHOLINESTERASE, RBC AND PLASMA	2930	2930	2930
KLO25-1608	CHOROIDEREMIA - CHM GENE - DELETION DUPLICATION (M)	8000	8000	8000
KLO25-1609	CHROMATIN ANTIBODIES, SERUM	2840	2840	2840
KLO25-1610	CHROMIUM URINE RANDOM	3500	3500	3500
KLO25-1611	CHROMIUM, 24 HOUR URINE	3500	3500	3500
KLO25-1612	CHROMIUM, BLOOD	3500	3500	3500
KLO25-1613	CHROMOGRANINA (CGA, EIA)	7500	7500	7500
KLO25-1614	CHROMOSOMAL BREAKAGE STUDIES FOR ATAXIA TELENGIECTESIE	4800	4800	4800
KLO25-1615	CHROMOSOMAL BREAKAGE STUDIES FOR FANCONIS ANAEMIA	7500	7500	7500
KLO25-1616	CHROMOSOMAL MICROARRAY - AFFYMETRIX CYTOSCAN 750K GENECHIP (M)	25000	25000	25000
KLO25-1617	CHROMOSOMAL MICROARRAY - AFFYMETRIX CYTOSCAN HD GENECHIP (M)	44000	44000	44000
KLO25-1618	CHROMOSOME ANALYSIS (POC)	6600	6600	6600
KLO25-1619	CHROMOSOME ANALYSIS , HIGH RESOLUTION-AUTISM	75000	75000	75000
KLO25-1620	CHROMOSOME ANALYSIS , HIGH RESOLUTION-MICROARRAY	42000	42000	42000
KLO25-1621	CHROMOSOME ANALYSIS , HIGH RESOLUTION-NEONATAL	3700	3700	3700
KLO25-1622	CHROMOSOME ANALYSIS , HIGH RESOLUTION-UNIPATERNAL DISOMY	75000	75000	75000
KLO25-1623	CHROMOSOME ANALYSIS FOR HAEMATOLOGIC MALI. BLOOD -B	3200	3200	3200
KLO25-1624	CHROMOSOME ANALYSIS, AMNIOTIC FLUID	10500	10500	10500
KLO25-1625	CHROMOSOME ANALYSIS, AMNIOTIC FLUID GIEMSA -G BANDING	9900	9900	9900
KLO25-1626	CHROMOSOME ANALYSIS, BLADDER CANCER	7610	7610	7610
KLO25-1627	CHROMOSOME ANALYSIS, BLOOD KARYOTYPE (Individual Case)	3200	3200	3200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1628	CHROMOSOME ANALYSIS, CORD BLOOD	3200	3200	3200
KLO25-1629	CHROMOSOME ANALYSIS, CVS	11000	11000	11000
KLO25-1630	CHROMOSOME ANALYSIS, GIEMSA G BANDING CHORIONIC VILLUS	10000	10000	10000
KLO25-1631	CHROMOSOME ANALYSIS, GIEMSA G BANDING, PLACENTAL BIOPSY	7500	7500	7500
KLO25-1632	CHROMOSOME ANALYSIS, GIEMSA G BANDING,CORD BLOOD	3600	3600	3600
KLO25-1633	CHROMOSOME ANALYSIS, GIEMSA G BANDING,POC	4500	4500	4500
KLO25-1634	CHROMOSOME ANALYSIS, GIEMSA G BANDING,SOFT TISSUE	7500	7500	7500
KLO25-1635	CHROMOSOME ANALYSIS, MOSAICISM	2850	2850	2850
KLO25-1636	CHROMOSOME ANALYSIS, PHILADELPHIA KARYOTYPE	2900	2900	2900
KLO25-1637	CHROMOSOME ANALYSIS, SISTER CHROMATID EXCHANGE	3920	3920	3920
KLO25-1638	CHROMOSOME ANALYSIS, SOLID TUMOUR	8700	8700	8700
KLO25-1639	CHROMOSOME BREAKAGE	6000	6000	6000
KLO25-1640	CHROMOSOME INTERPHASE PROFILING, AMNIOTIC FLUID	14500	14500	14500
KLO25-1641	CHROMOSOME INTERPHASE PROFILING, POC	12000	12000	12000
KLO25-1642	CHROMOSOME KARYOTYPING FOR SKIN BIOPSY	6000	6000	6000
KLO25-1643	CHROMOSOME SNP MICROARRAY (CSM)	27000	27000	27000
KLO25-1644	CHROMOSOMES 13 & 21 (BS)	4800	4800	4800
KLO25-1645	CHROMOSOMES 18, X & Y (BS)	4800	4800	4800
KLO25-1646	CHROMOTOUCH CHROMOSOME SNP MICROARRAY OPTIMA	15000	15000	15000
KLO25-1647	CHROMOTOUCH CHROMOSOME SNP MICROARRAY OPTIMA, PRODUCTS OF CONCEPTION	15000	15000	15000
KLO25-1648	CHRONIC FATIGUE SYNDROME	3800	3800	3800
KLO25-1649	CHRONIC LYMPHOCYTIC LEUKEMIA (CLL) , MUTATIONS -1	3800	3800	3800
KLO25-1650	CHRONIC LYMPHOCYTIC LEUKEMIA (CLL) , MUTATIONS -2	3800	3800	3800
KLO25-1651	CHRONIC LYMPHOCYTIC LEUKEMIA (CLL) , MUTATIONS -3	6000	6000	6000
KLO25-1652	CHRONIC LYMPHOCYTIC LEUKEMIA (CLL), PROGNOSTIC PANEL	19400	19400	19400
KLO25-1653	CHRONIC LYMPHOID LEUKEMIA PANEL - FLOWCYTOMETRY (M)	10500	10500	10500
KLO25-1654	CHRONIC MYELOPROLIFERATIVE DISORDER GENE PANEL (CMPD) (M)	36000	36000	36000
KLO25-1655	CHYLOMICRON QUALITATIVE SERUM	550	550	550
KLO25-1656	CHYLOMICRON QUALITATIVE, URINE	550	550	550
KLO25-1657	CHYMOTRYPSIN, STOOL	3210	3210	3210
KLO25-1658	CIC-IGM ANTIBODIES TO CIRCULATING IMMUNE COMPLEX, SERUM	3500	3500	3500
KLO25-1659	CILIOPATHY GENE PANEL (M)	25000	25000	25000
KLO25-1660	CIN-TEC PLUS	3900	3900	3900
KLO25-1661	CIRCULATING TUMOR CELLS FOR BREAST CANCER	53390	53390	53390
KLO25-1662	CIRCULATING TUMOR CELLS FOR COLORECTAL CANCER	59150	59150	59150
KLO25-1663	CIRCULATING TUMOR CELLS FOR PROSTRATE CANCER	78100	78100	78100
KLO25-1664	CIRCULATING TUMOR DNA (CTDNA) - ONCOSELECT -EGFR T790M AND C797S (M)	12000	12000	12000
KLO25-1665	CIRCULATING TUMOR DNA (CTDNA) - ONCOTRACK - 4 GENES (M)	24000	24000	24000
KLO25-1666	CIR-DU-CHAT SYNDROME (5P-)	6000	6000	6000
KLO25-1667	CITRATE	9200	9200	9200
KLO25-1668	CITRATE, 24 HOUR URINE	1200	1200	1200
KLO25-1669	CITRIC ACID, SERUM	3710	3710	3710
KLO25-1670	CITRULLINE SCREEN, SERUM	6450	6450	6450
KLO25-1671	CITRULLINE SCREEN, URINE	6450	6450	6450

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1672	CITRULLINEMIA GENE PANEL (M)	25000	25000	25000
KLO25-1673	C-KIT GIST	11000	11000	11000
KLO25-1674	C-KIT MUTATION DETECTION ,PCR	6700	6700	6700
KLO25-1675	CLADOSPORIUM HERBARUM - SPECIFIC IGG	2300	2300	2300
KLO25-1676	CLARIA NIPT TWIN (M)	19000	19000	19000
KLO25-1677	CLINICAL EXOME - 20MB(80-100X) (M)	25400	25400	25400
KLO25-1678	CLINICAL EXOME - 26MB (80 - 100x) (M)	23500	23500	23500
KLO25-1679	CLINICAL EXOME SEQUENCING (G)	24000	24000	24000
KLO25-1680	Clinical Exome Sequencing- Duo	45000	45000	45000
KLO25-1681	Clinical Exome Sequencing- Trio	65000	65000	65000
KLO25-1682	CLINICAL EXOME WITH REFLEX SANGER FOR INVESTIGATIONAL - 20MB (80-100X) (M)	38000	38000	38000
KLO25-1683	CLINICAL TOXICOLOGY SCREEN, BLOOD ONLY	8100	8100	8100
KLO25-1684	CLL PROGNOSTICATION/RISK STRATIFICATION GENE PANEL (M)	36000	36000	36000
KLO25-1685	CLOBAZAM LEVEL	3000	3000	3000
KLO25-1686	CLOMIPRAMINE	8500	8500	8500
KLO25-1687	CLONAZEPAM	14145	14145	14145
KLO25-1688	CLOPIDOGREL DOSAGE CYP2C19*2 & CYP2C19*3 (M)	2800	2800	2800
KLO25-1689	CLORAZEPATE	12410	12410	12410
KLO25-1690	CLOSTRIDIUM DIFFICILE, PCR	4000	4000	4000
KLO25-1691	CLOZAPINE	9200	9200	9200
KLO25-1692	CMA 315K + Clinical exome sequencing	40000	40000	40000
KLO25-1693	CMA 315K + Whole exome sequencing	45000	45000	45000
KLO25-1694	CMA 750K + Clinical exome sequencing	45000	45000	45000
KLO25-1695	CMA 750K + Whole exome sequencing	50000	50000	50000
KLO25-1696	CMA IN AMNIOTIC FLUID	52500	52500	52500
KLO25-1697	CMA IN BONE MARROW SAMPLE	52500	52500	52500
KLO25-1698	CMA IN CHORIONIC VILLUS	52500	52500	52500
KLO25-1699	CMA IN PERIPHERAL BLOOD-CHROMOSOMAL	49500	49500	49500
KLO25-1700	CMA IN PRODUCTS OF CONCEPTION	52500	52500	52500
KLO25-1701	CMA IN TUMOR TISSUE	52500	52500	52500
KLO25-1702	C-MET IHC ANALYSIS (M)	7400	7400	7400
KLO25-1703	CML/CNL (ATYPICAL) - PROGNOSTICATION GENE PANEL (M)	36000	36000	36000
KLO25-1704	CMML (CHRONIC MYELOMONOCYTIC LEUKEMIA) RISK STRATIFICATION GENE PANEL (M)	36000	36000	36000
KLO25-1705	cmPO	5300	5300	5300
KLO25-1706	cmPO / CCD79A / CCD3	9300	9300	9300
KLO25-1707	CMV AVIDITY IGG (L)	600	600	600
KLO25-1708	CMV PCR (LI)	4000	4000	4000
KLO25-1709	CMV QUALITATIVE (BS)	1680	1680	1680
KLO25-1710	CMV QUALITATIVE (G)	3100	3100	3100
KLO25-1711	CMV QUANTITATIVE (BS)	4200	4200	4200
KLO25-1712	CMV QUANTITATIVE (G)	5500	5500	5500
KLO25-1713	CMV Toxoplasma PCR	5500	5500	5500
KLO25-1714	COAGULATION PROFILE 2 *COAGULATION PROFILE 1 *FACTOR VIII ASSAY	2840	2840	2840
KLO25-1715	COBALT BLOOD	3500	3500	3500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1716	COBALT, 24 HOUR URINE	3500	3500	3500
KLO25-1717	COBALT, RANDOM URINE	3500	3500	3500
KLO25-1718	COCAINE AND METABOLITE CONFIRMATION, URINE	43100	43100	43100
KLO25-1719	COCAINE URINE	1200	1200	1200
KLO25-1720	COCCIDIOIDES ANTIBODY IMMUNODIFFSION	7550	7550	7550
KLO25-1721	COCKAYNE SYNDROME GENE PANEL (M)	17000	17000	17000
KLO25-1722	COHEN'S SYNDROME (VPS13B) GENE ANALYSIS (M)	16000	16000	16000
KLO25-1723	COLD AGGLUTININ, SERUM	670	670	670
KLO25-1724	COLLAGEN CROSS - LINKED N-TELOPEPLIDE (24 HRS.)	4690	4690	4690
KLO25-1725	COLLAGEN CROSS-LINKED N-TELOPEPTIDE, URINE NTX	7500	7500	7500
KLO25-1726	COLLAGEN DISEASES ANTIBODY PANEL	9700	9700	9700
KLO25-1727	COLON CANCER (FRAGMENT ANALYSIS + NGS) (BS)	24000	24000	24000
KLO25-1728	COLORECTAL CANCER - THERANOSTIC PANEL (HOT SPOT) (M)	36000	36000	36000
KLO25-1729	COMBO - EXOMEMIT - CLINICAL EXOME & WHOLE MITOCHONDRIAL GENOME SEQUENCING (M)	21000	21000	21000
KLO25-1730	COMBO - NEUROMIT COMPREHENSIVE WHOLE MITOCHONDRIAL GENOME SEQUENCING & NEUROLOGY G	28000	28000	28000
KLO25-1731	COMBO - NEUROREFLEX - COMPREHENSIVE NEUROLOGY PANEL WITH REFLEX SANGER FOR TWO FAM	44000	44000	44000
KLO25-1732	COMMON MUTATION PANEL mtDNA	13000	13000	13000
KLO25-1733	COMMON NEUROLOGICAL/NEUROMUSCULAR DISEASES (BS)	42000	42000	42000
KLO25-1734	COMPLEMENT COMPONENT C4	2280	2280	2280
KLO25-1735	COMPLEMENT PROFILE	8940	8940	8940
KLO25-1736	COMPLEMENT TOTAL, CH50	3700	3700	3700
KLO25-1737	COMPLETE INHERITED DISEASE PANEL (BS)	45600	45600	45600
KLO25-1738	COMPREHENSIVE CORONARY RISK PROFILE	4000	4000	4000
KLO25-1739	COMPREHENSIVE DRUG METABOLISM PROFILE -118 DRUGS	9000	9000	9000
KLO25-1740	COMPREHENSIVE NEONATAL SCREENING PANEL (Neonatal Screening Panel-1+NBS by MS/MS)	6000	6000	6000
KLO25-1741	COMPREHENSIVE NEUROLOGY PANEL (M)	21000	21000	21000
KLO25-1742	COMPREHENSIVE VIRAL DNA SCREEN	17000	17000	17000
KLO25-1743	COMPT GENOTYPE, PCR	36000	36000	36000
KLO25-1744	Congenital Adrenal Hyperplasia CYP21A2	25000	25000	25000
KLO25-1745	CONGENITAL ADRENAL HYPERPLASIA CYP21A2 (21-0H) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-1746	CONGENITAL ADRENAL HYPERPLASIA CYP21A2 (21-0H) GENE ANALYSIS (M)	21000	21000	21000
KLO25-1747	CONGENITAL AFIBRINOGENEMIA GENE PANEL (M)	36000	36000	36000
KLO25-1748	CONGENITAL AMEGAKARYOCYTIC THROMBOCYTOPENIA (MPL GENE ANALYSIS) (M)	30000	30000	30000
KLO25-1749	CONGENITAL DYSERYTHROPOIETIC ANEMIA GENE PANEL (M)	36000	36000	36000
KLO25-1750	CONGENITAL HYPERPATHYROIDISM - HYPOMAGNESIMIA GENE PANEL (M)	36000	36000	36000
KLO25-1751	CONGENITAL HYPOPITUITARISM GENE PANEL (M)	17000	17000	17000
KLO25-1752	CONGENITAL HYPOTHYROIDISM, CONFIRMATORY PANEL, SERUM	650	650	650
KLO25-1753	CONGENITAL MUSCULAR DYSTROPHY (LAMA2) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-1754	CONGENITAL MYOPATHY GENE PANEL (BS)	44400	44400	44400
KLO25-1755	CONGENITAL NEUTROPENIA GENE PANEL (M)	25000	25000	25000
KLO25-1756	CONGENITAL STATIONARY NIGHT BLINDNESS GENE PANEL (M)	25000	25000	25000
KLO25-1757	CONNECTIVE TISSUE DISORDER GENE PANEL (M)	17000	17000	17000
KLO25-1758	CONNEXIN 26 MUTATION	9800	9800	9800
KLO25-1759	CONNEXIN 30 (GJB6) DELETION/DUPLICATION ANALYSIS (M)	8500	8500	8500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1760	CONNEXIN 30 MUTATION	6800	6800	6800
KLO25-1761	CONNEXIN-26 (GJB2) DELETION/DUPLICATION ANALYSIS (M)	9000	9000	9000
KLO25-1762	CONNEXIN-26 (GJB2) GENE ANALYSIS (M)	9000	9000	9000
KLO25-1763	COPPER (ATOMIC ABSORPTION)	2000	2000	2000
KLO25-1764	COPPER (ATOMIC ABSORPTION), 24 HRS. URINE	2000	2000	2000
KLO25-1765	COPPER, LIVER	31810	31810	31810
KLO25-1766	COPPER, RANDOM URINE, ATOMIC ABSORPTION	2000	2000	2000
KLO25-1767	Core- 11q (ATM)	6000	6000	6000
KLO25-1768	Core- 13q deletion	3500	3500	3500
KLO25-1769	Core- 17p (TP53) Deletion	10500	10500	10500
KLO25-1770	Core- 17p del + IgVH mutation analysis	15000	15000	15000
KLO25-1771	Core- 17p Deletion	5500	5500	5500
KLO25-1772	Core- 1p deletion	8450	8450	8450
KLO25-1773	Core- 1p/19q (co-deletion)	10000	10000	10000
KLO25-1774	Core- 6q deletion	5200	5200	5200
KLO25-1775	Core- ABC Typing	8450	8450	8450
KLO25-1776	Core- aCML/CNL -prognostication gene panel	21000	21000	21000
KLO25-1777	Core- ADAMTS13 Activity	25000	25000	25000
KLO25-1778	Core- Addison's Disease (HLA-DR B1* 04:04)	5800	5800	5800
KLO25-1779	Core- Adrenoleukodystr ophy (ABCD1) Gene Analysis	21000	21000	21000
KLO25-1780	Core- AFP (Dako)	2400	2400	2400
KLO25-1781	Core- ALK (CD246)	2400	2400	2400
KLO25-1782	Core- ALK (Ventana D5F3)	8000	8000	8000
KLO25-1783	Core- ALK Fusion	10000	10000	10000
KLO25-1784	Core- ALK IHC + ROS1 IHC	12000	12000	12000
KLO25-1785	Core- ALL FISH Comprehensive Panel with Karyotyping	17000	17000	17000
KLO25-1786	Core- ALL FISH Panel	13500	13500	13500
KLO25-1787	Core- ALL Multiplex Basic	8500	8500	8500
KLO25-1788	Core- ALL Multiplex Comprehensive Panel with Karyotyping	15000	15000	15000
KLO25-1789	Core- ALL risk stratification gene panel- B-ALL	21000	21000	21000
KLO25-1790	Core- ALL risk stratification gene panel- T-ALL	21000	21000	21000
KLO25-1791	Core- AMACR	2400	2400	2400
KLO25-1792	Core- AML ETO t(8;21),Quantitative	6500	6500	6500
KLO25-1793	Core- AML MRD	14000	14000	14000
KLO25-1794	Core- AML Multiplex Advance Panel	14000	14000	14000
KLO25-1795	Core- AML Multiplex Basic Panel	8500	8500	8500
KLO25-1796	Core- AML Multiplex Basic Reflex to FLT3-ITD Allelic Ratio	10500	10500	10500
KLO25-1797	Core- AML Panel with MLL by FISH	12600	12600	12600
KLO25-1798	Core- AML Prognostic Panel (3 Markers)	12500	12500	12500
KLO25-1799	Core- AML risk stratification gene panel	21000	21000	21000
KLO25-1800	Core- Any 3 Cancer Marker	20000	20000	20000
KLO25-1801	Core- Atypical HUS (Hemolytic Uremic Syndrome) by MLPA	12000	12000	12000
KLO25-1802	Core- Autism Gene Panel	21000	21000	21000
KLO25-1803	Core- Auto Crossmatch	3500	3500	3500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1804	Core- B-Cell Specific Activator Protein (PAX-5)	2400	2400	2400
KLO25-1805	Core- BCL2(18q21.3) Gene Rearrangement (1)	6000	6000	6000
KLO25-1806	Core- BCL2(18q21.3) Gene Rearrangement (2)	11000	11000	11000
KLO25-1807	Core- BCL6	2400	2400	2400
KLO25-1808	Core- BCL6 (3q27.3) Gene Rearrangement	10100	10100	10100
KLO25-1809	Core- BCOR(C-10)	2400	2400	2400
KLO25-1810	Core- BCR-ABL Kinase Domain Mutations	12000	12000	12000
KLO25-1811	Core- BCR-ABL Qualitative	4500	4500	4500
KLO25-1812	Core- BCR-ABL Quantitative with p210 breakpoint	4200	4200	4200
KLO25-1813	Core- BCR-ABL Quantitative, International Scale [IS]	6500	6500	6500
KLO25-1814	Core- BCR-ABL translocation [t(9:22)]	4500	4500	4500
KLO25-1815	Core- Benign Infantile Epilepsy Gene Panel	21000	21000	21000
KLO25-1816	Core- Ber- Ep4 (EpCAM)	2400	2400	2400
KLO25-1817	Core- Beta Thalassemia-XM N polymorphism	7500	7500	7500
KLO25-1818	Core- Bone Biopsy	1650	1650	1650
KLO25-1819	Core- Bone Marrow Biopsy with Special Stain	1700	1700	1700
KLO25-1820	Core- BRAF	7000	7000	7000
KLO25-1821	Core- BRAF V600E (VE1)	4500	4500	4500
KLO25-1822	Core- BRCA1 and BRCA2 Gene Sequencing Panel	20000	20000	20000
KLO25-1823	Core- BRCA1 and BRCA2 Somatic Gene Sequencing Panel	25000	25000	25000
KLO25-1824	Core- BRG1 (E8V5B)	2400	2400	2400
KLO25-1825	Core- C3 Glomerulopathy Gene Panel	21000	21000	21000
KLO25-1826	Core- Cadaveric CDC Crossmatch (T cell & B cell) with DTT & AHG	6000	6000	6000
KLO25-1827	Core- CanCertain Basic	88500	88500	88500
KLO25-1828	Core- CanCertain Basic (Blood+Tissue)	147500	147500	147500
KLO25-1829	Core- CanCertain Comprehensive Panel	413000	413000	413000
KLO25-1830	Core- CanCertain Comprehensive Panel (Blood+Tissue)	531000	531000	531000
KLO25-1831	Core- CanCertain Immuno (Blood only)	177000	177000	177000
KLO25-1832	Core- CanCertain Standard	177000	177000	177000
KLO25-1833	Core- CanCertain Standard (Blood+Tissue)	295000	295000	295000
KLO25-1834	Core- CCND1 t(11;14 translocation)	5000	5000	5000
KLO25-1835	Core- CD20 CY (Dako)	2400	2400	2400
KLO25-1836	Core- CD20 Enumeration	2500	2500	2500
KLO25-1837	Core- CD34 Enumeration	3500	3500	3500
KLO25-1838	Core- CD4 Enumeration	1650	1650	1650
KLO25-1839	Core- CD4/CD8 Enumeration	2600	2600	2600
KLO25-1840	Core- CDC Crossmatch (T cell & B cell) with DTT & AHG Augmentation	3500	3500	3500
KLO25-1841	Core- CDKN2A/2B (P16)(9P21.3) Homozygous Gene Deletion	10000	10000	10000
KLO25-1842	Core- Charcot-Marie- Tooth and Sensory Neuropathies Gene Panel	21000	21000	21000
KLO25-1843	Core- Chimerism Pre Engraftment	6000	6000	6000
KLO25-1844	Core- Chimerism Split Cell Analysis-B CELL	9900	9900	9900
KLO25-1845	Core- Chimerism Split Cell Analysis-Myeloid Cell (CD15)	9900	9900	9900
KLO25-1846	Core- Chimerism Split Cell Analysis-T Cell (CD3)	9900	9900	9900
KLO25-1847	Core- Chimerism-Post Engraftment	6000	6000	6000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1848	Core- Chimerism-Pre Engraftment, Donor & Recipient	11000	11000	11000
KLO25-1849	Core- Chronic Myeloproliferative Disorder Gene Panel (CMPD)	21000	21000	21000
KLO25-1850	Core- Chronic Neutrophilic Leukemia (CNL) (CSF3R and SETBP1 gene)	11000	11000	11000
KLO25-1851	Core- Claudin-4 (3E2C1)	2400	2400	2400
KLO25-1852	Core- CLL Comprehensive panel	15000	15000	15000
KLO25-1853	Core- CLL MRD	14000	14000	14000
KLO25-1854	Core- CLL Prognostic Panel	10000	10000	10000
KLO25-1855	Core- CLL prognostic, IgVH mutation Panel	18500	18500	18500
KLO25-1856	Core- CLL prognostic, TP53, IgVH Mutation	27000	27000	27000
KLO25-1857	Core- CLL prognostication/ri sk stratification gene panel	21000	21000	21000
KLO25-1858	Core- CLPD Advance	12100	12100	12100
KLO25-1859	Core- CLPD Advance Reflex CLL Prognostic Panel	18000	18000	18000
KLO25-1860	Core- CLPD Advance reflex to CLL prognostic,TP53, IgHV Mutation	33000	33000	33000
KLO25-1861	Core- CLPD Basic	7700	7700	7700
KLO25-1862	Core- CLPD Basic reflex to CLL prognostic, TP53, IgHV Mutation	29000	29000	29000
KLO25-1863	Core- CLPD Leukemia	15000	15000	15000
KLO25-1864	Core- CML	21000	21000	21000
KLO25-1865	Core- CMML risk stratification gene panel	21000	21000	21000
KLO25-1866	Core- C-MYC Gene Rearrangement	6600	6600	6600
KLO25-1867	Core- coloCORE Panel 1	20000	20000	20000
KLO25-1868	Core- coloCORE Panel 2	25000	25000	25000
KLO25-1869	Core- coloCORE Panel 3	16000	16000	16000
KLO25-1870	Core- coloCORE Targeted Panel-1	22000	22000	22000
KLO25-1871	Core- coloCORE Targeted Panel-2	20000	20000	20000
KLO25-1872	Core- Comprehensive Hematological Malignancy Panel	30000	30000	30000
KLO25-1873	Core- Comprehensive Inherited Chronic Kidney Disease Gene Panel	21000	21000	21000
KLO25-1874	Core- Comprehensive Renal Gene Panel	21000	21000	21000
KLO25-1875	Core- COREprime BCR-ABL Qualitative	5000	5000	5000
KLO25-1876	Core- COREprime KRAS and NRAS Mutation Analysis	14500	14500	14500
KLO25-1877	Core- COREprime ALK	9200	9200	9200
KLO25-1878	Core- COREprime ALL Panel by FISH	14000	14000	14000
KLO25-1879	Core- COREprime AML Panel with MLL by FISH	13000	13000	13000
KLO25-1880	Core- COREprime BCR-ABL Quantitative [IS]	7000	7000	7000
KLO25-1881	Core- COREprime BCR-ABL translocation [t(9:22)]	5000	5000	5000
KLO25-1882	Core- COREprime Bone Biopsy	4000	4000	4000
KLO25-1883	Core- COREprime coloCORE Panel 1	21000	21000	21000
KLO25-1884	Core- COREprime Histopathology Transplant Kidney Biopsy (LM+IF)	7000	7000	7000
KLO25-1885	Core- COREprime Histopathology Transplant Kidney Biopsy, Light Microscopy (LM)	4500	4500	4500
KLO25-1886	Core- COREprime Histopathology, Transplant Kidney Biopsy, Direct Immunofluoresce nce (DIF)	5200	5200	5200
KLO25-1887	Core- COREprime Lung Panel 1	18000	18000	18000
KLO25-1888	Core- COREprime Lung Panel 2	25000	25000	25000
KLO25-1889	Core- COREprime mammaCORE Panel 1	4000	4000	4000
KLO25-1890	Core- COREprime Multiple Myeloma Diagnostic Panel	10500	10500	10500
KLO25-1891	Core- COREprime PD - L1 (SP142 Ventana)	11000	11000	11000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1892	Core- COREprime PD - L1 (SP263 Ventana)	6500	6500	6500
KLO25-1893	Core- COREprime PD - L1(22C3 Dako)	17500	17500	17500
KLO25-1894	Core- COREprime PML RARA, Fusion	6000	6000	6000
KLO25-1895	Core- COREprime ROS - 1	8500	8500	8500
KLO25-1896	Core- COREprime TEM	14000	14000	14000
KLO25-1897	Core- CXCR4 + MYD88 Panel	30000	30000	30000
KLO25-1898	Core- CXCR4 Gene Mutation Analysis	17500	17500	17500
KLO25-1899	Core- CYCD3 (T- Cell marker)	2050	2050	2050
KLO25-1900	Core- CYFRA 21.1	3850	3850	3850
KLO25-1901	Core- CYP21A2 gene mutation	20000	20000	20000
KLO25-1902	Core- CYP2C19 Genotyping	10000	10000	10000
KLO25-1903	Core- CYP3A4*22 Genotyping	7500	7500	7500
KLO25-1904	Core- Cystic Fibrosis Mutation Detection	11000	11000	11000
KLO25-1905	Core- Cystic Kidney Disease Gene Panel	21000	21000	21000
KLO25-1906	Core- Deep Gene sequencing Lbx	280000	280000	280000
KLO25-1907	Core- Di-George Syndrome/ 22q 11.2 deletion	6500	6500	6500
KLO25-1908	Core- DMD / BMD-79 Exons Gene Mutation	10500	10500	10500
KLO25-1909	Core- DMD Gene Mutation-79 exons (Prenatal)	13000	13000	13000
KLO25-1910	Core- DNA Ploidy & S Phase (Leukemia)	3200	3200	3200
KLO25-1911	Core- DNA Ploidy & S Phase (Solid Tumors)	4200	4200	4200
KLO25-1912	Core- DNA Profiling/ Fingerprinting for Solid Organ Transplant	10500	10500	10500
KLO25-1913	Core- DNA/RNA Extraction	2750	2750	2750
KLO25-1914	Core- DOG-1	2400	2400	2400
KLO25-1915	Core- Donor Specific IgG Antibodies (DSA), Class I & II	10500	10500	10500
KLO25-1916	Core- Double Negative T-Cells (DNT)	5000	5000	5000
KLO25-1917	Core- Double/Triple Hit Lymphoma (Blood and BM)	13000	13000	13000
KLO25-1918	Core- Double/Triple Hit Lymphoma (Solid Tumor)	17000	17000	17000
KLO25-1919	Core- DPD Deoxypyridinoline (Pyrilinks D) Urine	2100	2100	2100
KLO25-1920	Core- DPD/DPYD mutation analysis	7500	7500	7500
KLO25-1921	Core- dualCORE (Upto 7 Markers)	6500	6500	6500
KLO25-1922	Core- dualCORE Unlimited Markers	10000	10000	10000
KLO25-1923	Core- dualCORE Unlimited Markers (Small Biopsy)	11000	11000	11000
KLO25-1924	Core- Dystonia Gene Panel	21000	21000	21000
KLO25-1925	Core- E2A BA or TCF3 BA / t(1;19) / t(17;19)	5000	5000	5000
KLO25-1926	Core- Early Onset Juvenile Parkinson Gene Panel	21000	21000	21000
KLO25-1927	Core- EGFR + ALK Fusion	17500	17500	17500
KLO25-1928	Core- EGFR Somatic Mutation (Exon 18-21) Analysis	8500	8500	8500
KLO25-1929	Core- EGFR T790M	10000	10000	10000
KLO25-1930	Core- EGFR, ALK	13650	13650	13650
KLO25-1931	Core- Electron Microscopy for Muscle Biopsy	11500	11500	11500
KLO25-1932	Core- Endometrium Panel - Basic	15000	15000	15000
KLO25-1933	Core- Endometrium Panel -Advance	20000	20000	20000
KLO25-1934	Core- Epileptic Encephalopathy Gene Panel	21000	21000	21000
KLO25-1935	Core- Episodic Ataxia Comprehensive Profile, Hotspot	17000	17000	17000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1936	Core- Ewing's Sarcoma /EWSR1 Gene Rearrangement (22q12) for Ewing Sarcoma	8800	8800	8800
KLO25-1937	Core- Fanconi Anemia	7500	7500	7500
KLO25-1938	Core- FGFR1(8p12) Gene Rearrangement	11000	11000	11000
KLO25-1939	Core- FIP1 L1 -PDGFRA Gene Rearrangement	6000	6000	6000
KLO25-1940	Core- FISH - 22q Deletion or LSI Di George / VCFS	7500	7500	7500
KLO25-1941	Core- FLI-1	2400	2400	2400
KLO25-1942	Core- FLT3 Mutation Analysis	5800	5800	5800
KLO25-1943	Core- FLT3-ITD Allelic Ratio	4950	4950	4950
KLO25-1944	Core- Friedreich Ataxia - Molecular Diagnosis	6800	6800	6800
KLO25-1945	Core- GCV Resistance By Sequencing	8500	8500	8500
KLO25-1946	Core- geneCORE 12 gene panel	18000	18000	18000
KLO25-1947	Core- geneCORE Clinical Exome Sequencing	25000	25000	25000
KLO25-1948	Core- geneCORE Comprehensive panel-2	92000	92000	92000
KLO25-1949	Core- geneCORE Deep Gene Sequencing	280000	280000	280000
KLO25-1950	Core- geneCORE Immunotherapy panel-1	70000	70000	70000
KLO25-1951	Core- geneCORE Immunotherapy panel-2	60000	60000	60000
KLO25-1952	Core- geneCORE Paradigm	140000	140000	140000
KLO25-1953	Core- geneCORE Paradigm Comprehensive (22C3) Panel	150000	150000	150000
KLO25-1954	Core- geneCORE Paradigm Comprehensive (SP-142) Panel	150000	150000	150000
KLO25-1955	Core- geneCORE Paradigm Comprehensive (SP-263) Panel	145000	145000	145000
KLO25-1956	Core- geneCORE Paradigm Plus (SP-263)+MMR	150000	150000	150000
KLO25-1957	Core- geneCORE Paradigm Supreme (22C3) Panel	155000	155000	155000
KLO25-1958	Core- geneCORE Paradigm Supreme (SP-142) Panel	155000	155000	155000
KLO25-1959	Core- geneCORE Paradigm Supreme (SP-263) Panel	150000	150000	150000
KLO25-1960	Core- geneCORE Predict Advance	25000	25000	25000
KLO25-1961	Core- geneCORE Predict Basic	22000	22000	22000
KLO25-1962	Core- geneCORE Predict Comprehensive Advance	40000	40000	40000
KLO25-1963	Core- geneCORE Predict Comprehensive Basic	38000	38000	38000
KLO25-1964	Core- geneCORE Predict Digital MLPA	20000	20000	20000
KLO25-1965	Core- geneCORE Sarcoma Fusion Panel	100000	100000	100000
KLO25-1966	Core- geneCORE Somatic 161 Gene Reflex liquiCORE 52 Gene Panel	43000	43000	43000
KLO25-1967	Core- geneCORE Somatic 161 Gene Panel	39000	39000	39000
KLO25-1968	Core- geneCORE somatic 52 + liquiCORE 52 gene panel	65000	65000	65000
KLO25-1969	Core- geneCORE Somatic 52 Gene Panel	25000	25000	25000
KLO25-1970	Core- geneCORE somatic 52 reflex liquiCORE 52 gene panel	35000	35000	35000
KLO25-1971	Core- geneCORE Somatic Comprehensive Panel	85000	85000	85000
KLO25-1972	Core- geneCORE Somatic Endometrial Cancer Panel	30000	30000	30000
KLO25-1973	Core- geneCORE Somatic Endometrial Cancer Panel+MMR+p53	35000	35000	35000
KLO25-1974	Core- geneCORE Somatic Endometrial Cancer Panel+MSI+p53	40000	40000	40000
KLO25-1975	Core- geneCORE Somatic Endometrial Cancer Panel+p53	85000	85000	85000
KLO25-1976	Core- geneCORE Whole Exome Sequencing Panel	35000	35000	35000
KLO25-1977	Core- geneCORE Whole Mitochondrial Genome Sequencing	15000	15000	15000
KLO25-1978	Core- Genetic IQ	3200	3200	3200
KLO25-1979	Core- GIST Panel 1	14000	14000	14000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-1980	Core- Glycogen Storage Disorder Gene Panel	21000	21000	21000
KLO25-1981	Core- H3.3G34W (EPR23581-39)	2400	2400	2400
KLO25-1982	Core- H3K27M	2400	2400	2400
KLO25-1983	Core- H3K27ME3 (C36B11)	2400	2400	2400
KLO25-1984	Core- hemaCORE HLA Typing by Luminex (A,B,DR)	13000	13000	13000
KLO25-1985	Core- hemaCORE HLA Typing by Luminex (A,B,DR,DQ)	16000	16000	16000
KLO25-1986	Core- hemaCORE HLA Typing by NGS (A ,B ,C ,DR ,DQ ,DPB1)	13500	13500	13500
KLO25-1987	Core- hemaCORE HLA Typing by NGS (A, B, C, DR, DQ, DPB1- Any one)	8000	8000	8000
KLO25-1988	Core- hemaCORE HLA Typing by NGS (A,B,C,DR,DQ)	12000	12000	12000
KLO25-1989	Core- hemaCORE MDS Extended Panel - 8 markers	12500	12500	12500
KLO25-1990	Core- Hematopoietic Neoplasm Panel 1	1000	1000	1000
KLO25-1991	Core- Hematopoietic Neoplasm Panel 2	1785	1785	1785
KLO25-1992	Core- Heme Multigene Panel	350000	350000	350000
KLO25-1993	Core- Hemochromatosi s Detection HFE Genotyping	8500	8500	8500
KLO25-1994	Core- Heparin - Induced Thrombocytopeni a (HIT) / Anti-Platelet Factor 4-Heparin (PF4-H), IgG Quantitative	14300	14300	14300
KLO25-1995	Core- Hereditary Atypical Hemolytic Uremic Syndrome (HUS) Gene Panel	21000	21000	21000
KLO25-1996	Core- Hereditary Glomerulonephriti s Gene Panel	21000	21000	21000
KLO25-1997	Core- Hereditary Hyperoxaluria Gene Panel	21000	21000	21000
KLO25-1998	Core- Hereditary Hypomagnesemi a Gene Panel	21000	21000	21000
KLO25-1999	Core- Hereditary IgA Nephropathy Gene Panel	21000	21000	21000
KLO25-2000	Core- Hereditary Nephrocalcinosis Gene Panel	21000	21000	21000
KLO25-2001	Core- Hereditary Nephrogenic Diabetes Insipidus Gene Panel	21000	21000	21000
KLO25-2002	Core- Hereditary Nephrolithiasis Gene Panel	21000	21000	21000
KLO25-2003	Core- Hereditary Organic Acidemias Gene Panel	21000	21000	21000
KLO25-2004	Core- Hereditary Renal Cancer Gene Panel	21000	21000	21000
KLO25-2005	Core- Hereditary Renal Hematuria Gene Panel	21000	21000	21000
KLO25-2006	Core- Hereditary Spastic Paraplegia Gene Panel	21000	21000	21000
KLO25-2007	Core- HHV8	2400	2400	2400
KLO25-2008	Core- High Molecular Weight Cytokeratin (HMWCK)	2400	2400	2400
KLO25-2009	Core- Histopathology Liver Biopsy Panel	3300	3300	3300
KLO25-2010	Core- Histopathology Native Kidney Biopsy Panel (LM+IF+TEM)	13000	13000	13000
KLO25-2011	Core- Histopathology Transplant Kidney Biopsy Panel (LM+IF+TEM)	13000	13000	13000
KLO25-2012	Core- Histopathology, Direct Immunofluoresce nce (DIF), Kidney Biopsy (Expert Opinion)- Native/Transplant	8400	8400	8400
KLO25-2013	Core- Histopathology, Direct Immunofluoresce nce (DIF), Kidney Biopsy- Native/Transplant	3700	3700	3700
KLO25-2014	Core- Histopathology, Kidney Biopsy (Native) LM, IF (Expert Opinion)	10000	10000	10000
KLO25-2015	Core- Histopathology, Kidney Biopsy (Transplant) LM, IF (Expert Opinion)	10000	10000	10000
KLO25-2016	Core- Histopathology, Kidney Biopsy Panel-Native/Tra nsplant (LM)	3000	3000	3000
KLO25-2017	Core- Histopathology, Kidney Biopsy Panel-Native/Tra nsplant (LM)(Expert Opinion)	8000	8000	8000
KLO25-2018	Core- Histopathology, Kidney Biopsy(Native/ Transplant) Second Opinion (Expert Opinion)	8000	8000	8000
KLO25-2019	Core- Histopathology, Native Kidney Biopsy Panel (LM+IF)	5000	5000	5000
KLO25-2020	Core- Histopathology, Native Kidney Biopsy Panel (LM+IF+TEM)(Ex	23000	23000	23000
KLO25-2021	Core- Histopathology, Special Stain, Amyloid (Congo Red)	650	650	650
KLO25-2022	Core- Histopathology, Transplant Kidney Biopsy Panel (LM+IF)	5000	5000	5000
KLO25-2023	Core- Histopathology, Transplant Kidney Biopsy Panel (LM+IF+TEM)(Ex	23000	23000	23000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2024	Core- HLA - DR	2050	2050	2050
KLO25-2025	Core- HLA - DR4	5800	5800	5800
KLO25-2026	Core- HLA (B*58;01) hypersensitivity to allopurinol	10000	10000	10000
KLO25-2027	Core- HLA B27 Sub Typing	5500	5500	5500
KLO25-2028	Core- HLA hypersensitivity to Carbamazepine & Phenytoin (B*15;02)	7700	7700	7700
KLO25-2029	Core- HLA Typing by luminex (A, B, C, DR, DQ- Any one)	4600	4600	4600
KLO25-2030	Core- HLA-B*5701 Associated HCP5 rs2395029 Genotyping for Abacavir Hypersensitivity	4200	4200	4200
KLO25-2031	Core- HLA-B5 (B*51/52) Qualitative	4700	4700	4700
KLO25-2032	Core- HRR Gene Panel (Somatic + Germline) Extended	55000	55000	55000
KLO25-2033	Core- HRR Gene Panel (Germline + Somatic)	45000	45000	45000
KLO25-2034	Core- HRR Gene Panel (Germline)	27000	27000	27000
KLO25-2035	Core- HRR Gene Panel (Germline) Extended	30000	30000	30000
KLO25-2036	Core- HRR Gene Panel (Somatic)	27000	27000	27000
KLO25-2037	Core- HRR Gene Panel (Somatic) Extended	30000	30000	30000
KLO25-2038	Core- HRR Somatic reflex to HRR Germline	29500	29500	29500
KLO25-2039	Core- Human Placental Lactogen	40000	40000	40000
KLO25-2040	Core- Huntington disease mutation detection	5500	5500	5500
KLO25-2041	Core- Hyper Eosinophilic Syndrome	18000	18000	18000
KLO25-2042	Core- Hypersensitivity Pneumonitis (HP) Panel	8900	8900	8900
KLO25-2043	Core- Hypokalemia And Related Disorders Gene Panel	21000	21000	21000
KLO25-2044	Core- IDH 1 & 2 Mutation Analysis	8000	8000	8000
KLO25-2045	Core- IDH 1 R132H	4000	4000	4000
KLO25-2046	Core- IDH-1 & 2 mutation (AML Patient only)	9000	9000	9000
KLO25-2047	Core- IgH gene rearrangement	5250	5250	5250
KLO25-2048	Core- IGH/CCND1 t(11:14)	5250	5250	5250
KLO25-2049	Core- IGHV Mutation Analysis	11000	11000	11000
KLO25-2050	Core- IKZF1 Deletions (B-ALL or T-ALL)	7700	7700	7700
KLO25-2051	Core- IMD Panel, Quantitative	4900	4900	4900
KLO25-2052	Core- Immune Deficiency Panel 1	7500	7500	7500
KLO25-2053	Core- Immune Deficiency Panel 2	3000	3000	3000
KLO25-2054	Core- Intrachromosoma l Amplification of Chromosome 21	4000	4000	4000
KLO25-2055	Core- inv(16), Quantitative	5500	5500	5500
KLO25-2056	Core- inv(16)/ t(16:16)	5200	5200	5200
KLO25-2057	Core- JAK-2 Exon 12-15	7500	7500	7500
KLO25-2058	Core- JAK-2 Exon 14 to 12 (Reflex Testing)	7000	7000	7000
KLO25-2059	Core- JAK-2 Exon-12	5800	5800	5800
KLO25-2060	Core- JAK-2 Exon-14	5800	5800	5800
KLO25-2061	Core- JC Virus DNA Detection-PCR	5700	5700	5700
KLO25-2062	Core- JEV (Japanese Encephalitis Virus)	4400	4400	4400
KLO25-2063	Core- JMML risk stratification gene panel	21000	21000	21000
KLO25-2064	Core- Kappa (Diagnosis of B-cell Lymphomas)	2400	2400	2400
KLO25-2065	Core- Karyotyping for Hematological Malignancies, BCR-ABL	7500	7500	7500
KLO25-2066	Core- Karyotyping for Hematological Malignancies, Leukemia Advance (Flow Cytometry)	12600	12600	12600
KLO25-2067	Core- KIR GENOTYPING	15500	15500	15500

LAB MEDICINE

Test Code	Test Name	OPD/Economy	IPD Charges Semi Pvt	Pvt
KLO25-2068	Core- KRAS and NRAS Mutation Analysis	13500	13500	13500
KLO25-2069	Core- KRAS Somatic Mutation (Exon 2-4) Analysis	7500	7500	7500
KLO25-2070	Core- Leukemia Diagnosis/MRD Combo Panel	21500	21500	21500
KLO25-2071	Core- Leukemia Panel - 3	17000	17000	17000
KLO25-2072	Core- Leukemia Panel - 4	14000	14000	14000
KLO25-2073	Core- Leukemia Panel Advance	9900	9900	9900
KLO25-2074	Core- Leukemia Panel Basic	7000	7000	7000
KLO25-2075	Core- Leukemia reflex Panel 1	20000	20000	20000
KLO25-2076	Core- Leukemia Reflex Panel 2	15000	15000	15000
KLO25-2077	Core- Leukocyte Adhesion Deficiency (LAD I & II)	5200	5200	5200
KLO25-2078	Core- Leukodystrophy Gene Panel	21000	21000	21000
KLO25-2079	Core- liquiCORE 12 gene Panel	35000	35000	35000
KLO25-2080	Core- liquiCORE 52 gene panel	48000	48000	48000
KLO25-2081	Core- liquiCORE EGFR	15000	15000	15000
KLO25-2082	Core- liquiCORE Lung Panel	35000	35000	35000
KLO25-2083	Core- liquiCORE OncoDiscover CTC Comprehensive	20000	20000	20000
KLO25-2084	Core- liquiCORE PIK3CA	16000	16000	16000
KLO25-2085	Core- LMO2 (SP51)	2400	2400	2400
KLO25-2086	Core- Lymphocyte subset Panel With NK cells	8000	8000	8000
KLO25-2087	Core- Lymphoma t(11;18)(MALT1) translocation,Bon e marrow	8000	8000	8000
KLO25-2088	Core- Lymphoma t(11;18)(MALT1) translocation,Tiss ue	10500	10500	10500
KLO25-2089	Core- mammaCORE BRCA 1&2 Deletion/Duplicati on Panel	15000	15000	15000
KLO25-2090	Core- mammaCORE BRCA Advanced Panel	40000	40000	40000
KLO25-2091	Core- mammaCORE BRCA Advanced Plus Panel	50000	50000	50000
KLO25-2092	Core- mammaCORE BRCA Comprehensive Panel	30000	30000	30000
KLO25-2093	Core- mammaCORE Panel 1	3150	3150	3150
KLO25-2094	Core- mammaCORE Panel 2	4250	4250	4250
KLO25-2095	Core- mammaCORE Panel 3	5350	5350	5350
KLO25-2096	Core- Mammaprint + Blueprint	199000	199000	199000
KLO25-2097	Core- Mastocytosis	21000	21000	21000
KLO25-2098	Core- MDM2 (12q15) Gene Amplification-FIS H	10000	10000	10000
KLO25-2099	Core- MDS by Flow	12000	12000	12000
KLO25-2100	Core- MDS MRD	14000	14000	14000
KLO25-2101	Core- MDS Panel	21000	21000	21000
KLO25-2102	Core- MECOM Breakapart (3q)	6000	6000	6000
KLO25-2103	Core- Melan A	2400	2400	2400
KLO25-2104	Core- Melanoma Panel 1	13500	13500	13500
KLO25-2105	Core- Melanoma Panel 2	19000	19000	19000
KLO25-2106	Core- MELAS Mutation detection	7250	7250	7250
KLO25-2107	Core- MET	10000	10000	10000
KLO25-2108	Core- Metachromatic Leukodystrophy Quantitative, Blood	2750	2750	2750
KLO25-2109	Core- Miller Dieker Syndrome (FISH for 17p13)	6000	6000	6000
KLO25-2110	Core- Mismatch Repair (MMR) protein Panel	8500	8500	8500
KLO25-2111	Core- Mixed Antibody Screen (PRA Class I & II & MICA) Qualitative	6500	6500	6500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2112	Core- MLH1	2400	2400	2400
KLO25-2113	Core- MLH1 Mutation Analysis	8000	8000	8000
KLO25-2114	Core- MLH1 Promoter Hypermethylation	11000	11000	11000
KLO25-2115	Core- MLL Gene Rearrangement	5800	5800	5800
KLO25-2116	Core- Modified Acid Fast Stain for Leprosy	1250	1250	1250
KLO25-2117	Core- Monosomy 1	3800	3800	3800
KLO25-2118	Core- Monosomy 5	6800	6800	6800
KLO25-2119	Core- Monosomy7/Del7 q	5250	5250	5250
KLO25-2120	Core- MPL Mutation Analysis	6000	6000	6000
KLO25-2121	Core- MPN Panel	21000	21000	21000
KLO25-2122	Core- MPN Panel 1	14000	14000	14000
KLO25-2123	Core- MPN Panel 10	17000	17000	17000
KLO25-2124	Core- MPN Panel 2	12000	12000	12000
KLO25-2125	Core- MPN Panel 3	15000	15000	15000
KLO25-2126	Core- MPN Panel 4	14300	14300	14300
KLO25-2127	Core- MPN Panel 5	11500	11500	11500
KLO25-2128	Core- MPN Panel 7	11000	11000	11000
KLO25-2129	Core- MPN Panel 8	13000	13000	13000
KLO25-2130	Core- MSH2 Gene Sequencing	30000	30000	30000
KLO25-2131	Core- MSH6	2400	2400	2400
KLO25-2132	Core- MSH6 Gene Sequencing	30000	30000	30000
KLO25-2133	Core- MTHFR mutation analysis	6000	6000	6000
KLO25-2134	Core- MUC 1	2400	2400	2400
KLO25-2135	Core- MUC5AC	2400	2400	2400
KLO25-2136	Core- Mucorales Species Detection	7000	7000	7000
KLO25-2137	Core- Multiple Myeloma 7 Markers Panel	14000	14000	14000
KLO25-2138	Core- Multiple Myeloma Comprehensive Panel Quantitative, Serum	8000	8000	8000
KLO25-2139	Core- Multiple Myeloma Comprehensive Panel Quantitative, Urine	8500	8500	8500
KLO25-2140	Core- Multiple Myeloma Diagnostic Panel	8500	8500	8500
KLO25-2141	Core- Multiple Myeloma Flow Panel	7500	7500	7500
KLO25-2142	Core- Multiple Myeloma MRD	14000	14000	14000
KLO25-2143	Core- Muscle tissue with enzyme histochemistry with reflex IHC	5500	5500	5500
KLO25-2144	Core- Muscle Biopsy with Special Stains	3300	3300	3300
KLO25-2145	Core- Muscular dystrophy & congenital myopathy gene panel	21000	21000	21000
KLO25-2146	Core- Mutation Specific Testing	7500	7500	7500
KLO25-2147	Core- Myasthenia Gravis (HLA-DRB1* 15:01)	5800	5800	5800
KLO25-2148	Core- MYD88, Mutation Analysis	17000	17000	17000
KLO25-2149	Core- Myelodysplastic Syndrome (MDS) Panel	10500	10500	10500
KLO25-2150	Core- MyoD1	2400	2400	2400
KLO25-2151	Core- Myositis Profile- IgG (16 Antigens)	15000	15000	15000
KLO25-2152	Core- Myositis Profile-IgG (11 Antigens)	8500	8500	8500
KLO25-2153	Core- Napsin A	2400	2400	2400
KLO25-2154	Core- Narcolepsy (HLA-DQB1* 06:02)	5800	5800	5800
KLO25-2155	Core- Natural Killer Cells (NKC) CD3/CD16/CD56	4800	4800	4800

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2156	Core- neoCORE 11 Disorders	2000	2000	2000
KLO25-2157	Core- neoCORE 4 Disorders	1200	1200	1200
KLO25-2158	Core- neoCORE 57 Disorders	2600	2600	2600
KLO25-2159	Core- neoCORE 6 Disorders	1500	1500	1500
KLO25-2160	Core- neoCORE 7 Disorders	1650	1650	1650
KLO25-2161	Core- neoCORE Mega profile	5600	5600	5600
KLO25-2162	Core- Nephrotic Syndrome/ Focal Segmental Glomeruloscleros is Gene Panel	21000	21000	21000
KLO25-2163	Core- Nerve Biopsy with Special Stain with Reflex IHC	5500	5500	5500
KLO25-2164	Core- neuroCORE GlioSeq	170000	170000	170000
KLO25-2165	Core- NeuroDDx	12000	12000	12000
KLO25-2166	Core- Neuronal (Paraneoplastic) Antibody Profile-2 (12 Antigens)	15500	15500	15500
KLO25-2167	Core- Neuronal Antibody Profile-1 (6 Antigens)	9900	9900	9900
KLO25-2168	Core- Neuronal Ceroid Lipofuscinosis Gene Panel	21000	21000	21000
KLO25-2169	Core- Neurovirus panel qualitative PCR	7800	7800	7800
KLO25-2170	Core- NGAL (Neutrophil Gelatinase Associated Lipocalin)	9000	9000	9000
KLO25-2171	Core- NK Cells Index Analysis - Endometrium Histopathology	4400	4400	4400
KLO25-2172	Core- NKX2.2	2400	2400	2400
KLO25-2173	Core- NKX3.1	2400	2400	2400
KLO25-2174	Core- Non-Invasive Prenatal Testing (NIPT)	15750	15750	15750
KLO25-2175	Core- Non-Invasive Prenatal Testing (NIPT) with Microdeletions	25000	25000	25000
KLO25-2176	Core- NPM1 Quantitative	5700	5700	5700
KLO25-2177	Core- NRAS Somatic Mutation (Exon 2-4) Analysis	7500	7500	7500
KLO25-2178	Core- NTRK 1 Gene Rearrangement	8000	8000	8000
KLO25-2179	Core- NTRK 1/2/3 Fusions Gene Panel	18000	18000	18000
KLO25-2180	Core- NTRK 2 Gene rearrangement	8000	8000	8000
KLO25-2181	Core- NTRK 3 Gene rearrangement	8000	8000	8000
KLO25-2182	Core- NTx N-Telopeptide (Collagen Crosslinked)	4200	4200	4200
KLO25-2183	Core- NUDT15 gene mutation analysis	6000	6000	6000
KLO25-2184	Core- OCT 3/4	2400	2400	2400
KLO25-2185	Core- OCT-2 (PT2)	2400	2400	2400
KLO25-2186	Core- Oncogenic E6/E7 mRNA	3900	3900	3900
KLO25-2187	Core- OncoVeryx-F	15000	15000	15000
KLO25-2188	Core- Opportunistic Enteric Parasite Screen	1300	1300	1300
KLO25-2189	Core- Ovarian Cancer Panel	3000	3000	3000
KLO25-2190	Core- p16 Ventana (E6H4)	3850	3850	3850
KLO25-2191	Core- Paired Box 8 (PAX-8)	2400	2400	2400
KLO25-2192	Core- Panel Reactive Antibodies (PRA) Qualitative reflex PRA Quantitative (Class I & II)	15000	15000	15000
KLO25-2193	Core- Panel Reactive IgG Antibodies (PRA), Class I Quantitative	12000	12000	12000
KLO25-2194	Core- Panel Reactive IgG Antibodies (PRA), Class II Quantitative	12000	12000	12000
KLO25-2195	Core- pan-TRK (EPR17341)	2400	2400	2400
KLO25-2196	Core- PDGFRA Mutation Analysis (Solid Tumors)	7500	7500	7500
KLO25-2197	Core- PDGFRA, (4q12) Gene Rearrangement	5250	5250	5250
KLO25-2198	Core- PDGFRB, (5q32-5q33) Gene Rearrangement	5250	5250	5250
KLO25-2199	Core- PGS/PGT-A per embryo	14500	14500	14500

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2200	Core- PGT-M per embryo	23000	23000	23000
KLO25-2201	Core- PGT-SR per embryo	25000	25000	25000
KLO25-2202	Core- pHH3 (BC37)	2400	2400	2400
KLO25-2203	Core- Ph-Like ALL Panel	18500	18500	18500
KLO25-2204	Core- PIK3CA	14500	14500	14500
KLO25-2205	Core- PLA2R	2400	2400	2400
KLO25-2206	Core- PML - RARA fusion	5500	5500	5500
KLO25-2207	Core- PML-RARA, Qualitative	6000	6000	6000
KLO25-2208	Core- PML-RARA, Quantitative	7000	7000	7000
KLO25-2209	Core- PMS1 Homolog 2, Mismatch Repair System Component (PMS2)	52500	52500	52500
KLO25-2210	Core- PMS2	2400	2400	2400
KLO25-2211	Core- PNH Advance	6500	6500	6500
KLO25-2212	Core- PNH Basic	4400	4400	4400
KLO25-2213	Core- PNH Diagnostic Panel	3300	3300	3300
KLO25-2214	Core- POLE Gene Mutation Analysis	9000	9000	9000
KLO25-2215	Core- PRA Class I & II, Quantitative	19000	19000	19000
KLO25-2216	Core- Prader Willi syndrome (PWS)	10000	10000	10000
KLO25-2217	Core- Prenatal Diagnosis by Karyotyping	10500	10500	10500
KLO25-2218	Core- Prenatal Diagnosis on CVS by FISH	8500	8500	8500
KLO25-2219	Core- Product of Conception (POC) Testing by NGS	8000	8000	8000
KLO25-2220	Core- ProGRP; Pro Gastrin-Releasin g Peptide	13500	13500	13500
KLO25-2221	Core- Psoriasis Vulgaris (HLA-C*06)	4400	4400	4400
KLO25-2222	Core- PTEN	2400	2400	2400
KLO25-2223	Core- Pulmo DDx	6900	6900	6900
KLO25-2224	Core- Pulmo DDx Comprehensive Panel	24000	24000	24000
KLO25-2225	Core- pulmoCORE 12 gene	18000	18000	18000
KLO25-2226	Core- pulmoCORE 12 gene + liquiCORE lung Panel	48000	48000	48000
KLO25-2227	Core- pulmoCORE 12 gene panel - 2	22000	22000	22000
KLO25-2228	Core- pulmoCORE 12 gene panel panel-1	25000	25000	25000
KLO25-2229	Core- pulmoCORE 12 gene reflex liquiCORE lung Panel	26500	26500	26500
KLO25-2230	Core- pulmoCORE 20 gene Panel	20000	20000	20000
KLO25-2231	Core- pulmoCORE 5 Gene Panel with MET (FISH)	23000	23000	23000
KLO25-2232	Core- pulmoCORE any 4 Markers(High Resolution)	13000	13000	13000
KLO25-2233	Core- pulmoCORE Basic Panel	15000	15000	15000
KLO25-2234	Core- pulmoCORE Extended Panel	25000	25000	25000
KLO25-2235	Core- pulmoCORE Panel 1	21000	21000	21000
KLO25-2236	Core- pulmoCORE Panel 10	43000	43000	43000
KLO25-2237	Core- pulmoCORE Panel 11	27000	27000	27000
KLO25-2238	Core- pulmoCORE Panel 12	28500	28500	28500
KLO25-2239	Core- pulmoCORE Panel 18	26000	26000	26000
KLO25-2240	Core- pulmoCORE Panel 19	33000	33000	33000
KLO25-2241	Core- pulmoCORE Panel 2	22000	22000	22000
KLO25-2242	Core- pulmoCORE Panel 20	37000	37000	37000
KLO25-2243	Core- pulmoCORE panel 3	30000	30000	30000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2244	Core- pulmoCORE Panel 4	30000	30000	30000
KLO25-2245	Core- pulmoCORE Panel 5	25000	25000	25000
KLO25-2246	Core- pulmoCORE Panel 6	24000	24000	24000
KLO25-2247	Core- pulmoCORE Panel 7	28000	28000	28000
KLO25-2248	Core- pulmoCORE Panel 8	28500	28500	28500
KLO25-2249	Core- pulmoCORE Panel 9	30000	30000	30000
KLO25-2250	Core- Radical Biopsy + Histo Biopsy Frozen Section	6500	6500	6500
KLO25-2251	Core- Renal Tubular Acidosis Gene Panel	21000	21000	21000
KLO25-2252	Core- Renal Tubulopathy And Nephrolithiasis Gene Panel	21000	21000	21000
KLO25-2253	Core- RET Gene mutation	20000	20000	20000
KLO25-2254	Core- RET Gene Rearrangement Assay	10000	10000	10000
KLO25-2255	Core- Retinal Degeneration Gene Panel	21000	21000	21000
KLO25-2256	Core- Rett Syndrome MECP2 Sequencing	7000	7000	7000
KLO25-2257	Core- Rheumatoid Arthritis (HLA-DR 4)	4400	4400	4400
KLO25-2258	Core- Sarcoma Mutation Analysis Panel	16000	16000	16000
KLO25-2259	Core- SCA-1 Gene	3500	3500	3500
KLO25-2260	Core- SCA-12 (Spinocerebellar Ataxia), PPP2R2B Gene Mutation	3300	3300	3300
KLO25-2261	Core- Schistosoma Ab, IgG	19500	19500	19500
KLO25-2262	Core- Single Antigen Bead (SAB) Class I & II IgG Antibodies	42000	42000	42000
KLO25-2263	Core- Single Antigen Bead (SAB) Class I IgG Antibodies	23000	23000	23000
KLO25-2264	Core- Single Antigen Bead (SAB) Class II IgG Antibodies	22000	22000	22000
KLO25-2265	Core- Skin Biopsy Panel	4200	4200	4200
KLO25-2266	Core- Skin Biopsy-DIF	2200	2200	2200
KLO25-2267	Core- Skin Biopsy-LM	2200	2200	2200
KLO25-2268	Core- Sperm DNA Fragmentation	6300	6300	6300
KLO25-2269	Core- Spinal Muscular Atrophy (SMA) by MLPA	4800	4800	4800
KLO25-2270	Core- Spinal Muscular Atrophy (SMA) by PCR	4000	4000	4000
KLO25-2271	Core- Spinal Muscular Atrophy Gene Panel	21000	21000	21000
KLO25-2272	Core- Spinocerebellar Ataxia Panel (SCA)	15000	15000	15000
KLO25-2273	Core- Steroid Resistant Nephrotic Syndrome Gene Panel	21000	21000	21000
KLO25-2274	Core- Structural Basal Ganglia Disorders Gene Panel	21000	21000	21000
KLO25-2275	Core- Synovial Sarcoma/SS18 Gene Rearrangement	11000	11000	11000
KLO25-2276	Core- T & B Cell Flow Crossmatch (Recipient & Donor)	7500	7500	7500
KLO25-2277	Core- T- B -NK cell lymphocytes subset Analysis	6000	6000	6000
KLO25-2278	Core- t(1;19) (q23;p13.3); TCF3-PBX1(E2A- PBX1), PCR Qualitative	4250	4250	4250
KLO25-2279	Core- t(12;21)(p13;q22) ETV6/RUNX1 (TEL/AML1)	5400	5400	5400
KLO25-2280	Core- t(14;16)(q32;q23) IGH/MAF	5400	5400	5400
KLO25-2281	Core- t(14;20)(q32;q12) IGH/MAFB	5400	5400	5400
KLO25-2282	Core- t(17;19)(q22;p13) TCF3/HLF	6000	6000	6000
KLO25-2283	Core- t(4;14)(p16;q32) IGH/FGFR3	5400	5400	5400
KLO25-2284	Core- t(5;12)(q33;p13) ETV6/PDGFRB	6500	6500	6500
KLO25-2285	Core- t(8;21)(AML1/ET O)	4950	4950	4950
KLO25-2286	Core- Tacrolimus Genotyping (CYP3A5)	7000	7000	7000
KLO25-2287	Core- T-ALL MRD	14000	14000	14000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2288	Core- TERT Mutation	10500	10500	10500
KLO25-2289	Core- Thalassemia beta globin gene sequencing	12500	12500	12500
KLO25-2290	Core- Tinto MDM2	2400	2400	2400
KLO25-2291	Core- Tinto STAT6	2400	2400	2400
KLO25-2292	Core- TP53 and POLE sequencing	21000	21000	21000
KLO25-2293	Core- TP53 and POLE sequencing + Mismatch Repair (MMR) protein Panel	25000	25000	25000
KLO25-2294	Core- TP53 and POLE sequencing +Microsatellite Instability (MSI)	28000	28000	28000
KLO25-2295	Core- TP53 sequencing	12000	12000	12000
KLO25-2296	Core- T-PIT or TBX19 (CL6251)	2400	2400	2400
KLO25-2297	Core- TPMT Genotyping	6000	6000	6000
KLO25-2298	Core- Translocation (1;19)	5500	5500	5500
KLO25-2299	Core- Transmission Electron Microscopy (TEM)	11000	11000	11000
KLO25-2300	Core- Transmission Electron Microscopy (TEM) (Expert Opinion)	13000	13000	13000
KLO25-2301	Core- T-regulatory cell test	15000	15000	15000
KLO25-2302	Core- TSC1 & TSC2 Gene Analysis	19500	19500	19500
KLO25-2303	Core- Type 1 Diabetes (HLA-DR3, DR4)	8500	8500	8500
KLO25-2304	Core- Type 1- Myotonic Dystrophy	9000	9000	9000
KLO25-2305	Core- UGT1A1 Gene Polymorphism	9100	9100	9100
KLO25-2306	Core- UGT1A1 Genotyping	7500	7500	7500
KLO25-2307	Core- UroVysion	12000	12000	12000
KLO25-2308	Core- VHL Gene Deletion/Duplicati on	15000	15000	15000
KLO25-2309	Core- VHL Gene Mutation 3 Exons by Sequencing	25000	25000	25000
KLO25-2310	Core- VNTR Chimerism Study	8500	8500	8500
KLO25-2311	Core- William's Syndrome (FISH)	7700	7700	7700
KLO25-2312	Core- Wilms tumor (WT1) gene	9000	9000	9000
KLO25-2313	Core- Wilson Disease - ATP7B Gene Sequencing	20000	20000	20000
KLO25-2314	Core- WT1 (Wilms Tumor)	2400	2400	2400
KLO25-2315	Core- X Y Chimerism Recipient Only	5200	5200	5200
KLO25-2316	Core- xenoCORE Antibody Panel	13500	13500	13500
KLO25-2317	Core- xenoCORE Cadaver Panel (Patient)	46000	46000	46000
KLO25-2318	Core- xenoCORE Crossmatch Panel	9000	9000	9000
KLO25-2319	Core- xenoCORE HLA Typing by Luminex (A,B,C,DR and DQ)	18000	18000	18000
KLO25-2320	Core- xenoCORE HLA Typing by Luminex (A,B,DR)	13000	13000	13000
KLO25-2321	Core- xenoCORE HLA Typing by Luminex (A,B,DR,DQ)	16000	16000	16000
KLO25-2322	Core- xenoCORE HLA Typing by NGS (A, B, C, DR, DQ, DPB1- Any one)	8000	8000	8000
KLO25-2323	Core- xenoCORE HLA Typing by NGS (A, B, C, DR, DQ, DPB1)	13500	13500	13500
KLO25-2324	Core- xenoCORE HLA Typing by NGS (A,B,C,DR,DQ)	12000	12000	12000
KLO25-2325	Core- xenoCORE Panel 1 (Patient & Donor)	31000	31000	31000
KLO25-2326	Core- xenoCORE panel 11	12000	12000	12000
KLO25-2327	Core- xenoCORE Panel 13 (Patient & Donor)	37000	37000	37000
KLO25-2328	Core- xenoCORE Panel 14 (Patient & donor)	43000	43000	43000
KLO25-2329	Core- xenoCORE Panel 15 (Patient & Donor)	33000	33000	33000
KLO25-2330	Core- xenoCORE Panel 16 (Patient & Donor)	64000	64000	64000
KLO25-2331	Core- xenoCORE Panel 17 (Patient & Donor)	40500	40500	40500

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2332	Core- xenoCORE Panel 19 (Donor)	16000	16000	16000
KLO25-2333	Core- xenoCORE Panel 19 (Patient)	22500	22500	22500
KLO25-2334	Core- xenoCORE Panel 2 (Patient & Donor)	33000	33000	33000
KLO25-2335	Core- xenoCORE Panel 20 (Donor)	13000	13000	13000
KLO25-2336	Core- xenoCORE Panel 20 (Patient)	20000	20000	20000
KLO25-2337	Core- xenoCORE Panel 21 (Donor)	13000	13000	13000
KLO25-2338	Core- xenoCORE Panel 21 (Patient)	28500	28500	28500
KLO25-2339	Core- xenoCORE Panel 3 (Patient & donor)	44000	44000	44000
KLO25-2340	Core- xenoCORE Panel 4	63500	63500	63500
KLO25-2341	Core- xenoCORE Panel 5 (Patient & donor)	42000	42000	42000
KLO25-2342	Core- xenoCORE Panel 6	49000	49000	49000
KLO25-2343	Core- xenoCORE Panel 7 (Patient & donor)	68000	68000	68000
KLO25-2344	Core- xenoCORE Panel 8 (Patient & donor)	31000	31000	31000
KLO25-2345	Core- xenoCORE Panel 9 (Patient & donor)	41000	41000	41000
KLO25-2346	Core- X-Linked Dyserythropoietic Anemia And Thrombocytopeni a GATA1 Hotspot	12000	12000	12000
KLO25-2347	Core- ZnT8 (ZINC TRANSPORTER 8) ANTIBODY	6900	6900	6900
KLO25-2348	CORNEAL DYSTROPHY GENE PANEL (M)	25000	25000	25000
KLO25-2349	CORNELIA DE LANGE SYNDROME GENE PANEL (M)	17000	17000	17000
KLO25-2350	CORTICOSTERONE	2700	2700	2700
KLO25-2351	CORTICOTROPIN RELEASING HORMONE, CRH	22830	22830	22830
KLO25-2352	CORTISOL BINDING GLOBULIN, TRANSCORTIN	8100	8100	8100
KLO25-2353	CORTISOL FREE	11600	11600	11600
KLO25-2354	CORTISOL SALIVA	2200	2200	2200
KLO25-2355	CORTISOL, FREE, 24 HOUR URINE	1000	1000	1000
KLO25-2356	CORTISONE : CORTISOL RATIO	2700	2700	2700
KLO25-2357	CORTISONE, 24 HOUR URINE, COMPOUND E	26300	26300	26300
KLO25-2358	CORTISONE, COMPOUND E	13300	13300	13300
KLO25-2359	CORTISONE, SERUM	2700	2700	2700
KLO25-2360	COXEILLA BRUNETTI IgG	1850	1850	1850
KLO25-2361	COXEILLA BRUNETTI IgM	1850	1850	1850
KLO25-2362	COXSACKIE A (2 4 7 8 9 10 16) ANTIBODY	11800	11800	11800
KLO25-2363	COXSACKIE ANTIBODIES PANEL, IGG & IGM	3080	3080	3080
KLO25-2364	COXSACKIE ANTIBODY IGG	1630	1630	1630
KLO25-2365	COXSACKIE ANTIBODY IGM	1630	1630	1630
KLO25-2366	COXSACKIE B(1-6) ANTIBODIES, SERUM	4380	4380	4380
KLO25-2367	CPEO, MITOCHONDRIAL MUTATION PANEL	7490	7490	7490
KLO25-2368	C-PEPTIDE GLUCAGON STIMULATION TEST -	4200	4200	4200
KLO25-2369	C-PEPTIDE GLUCOSE TOLERANCE STIMULATION TEST EXTENDED	10170	10170	10170
KLO25-2370	C-PEPTIDE INSULIN SUPRESSION TEST - SERUM	7520	7520	7520
KLO25-2371	C-PEPTIDE LEVEL, 24 HRS. URINE	1050	1050	1050
KLO25-2372	C-PEPTIDE, SERUM.(L)	1050	1050	1050
KLO25-2373	CPK ISENZYME ELECTROPHORESIS, CK ENZYMES	8720	8720	8720
KLO25-2374	CPK MM FRACTION	6500	6500	6500
KLO25-2375	CRANIOSYNOSTOSIS GENE PANEL (M)	25000	25000	25000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2376	CRI-DU-CHAT SYNDROME (L)	6000	6000	6000
KLO25-2377	CRYOGLOBULINS, CONFIRMATORY	6200	6200	6200
KLO25-2378	CRYOGLOBULINS, SCREENING (QUALITATIVE)	1090	1090	1090
KLO25-2379	CRYPTOCOCCUS ANTIBODY	7500	7500	7500
KLO25-2380	CRYPTOCOCCUS ANTIBODY, CSF	7500	7500	7500
KLO25-2381	CRYPTOCOCCUS NEOFORMANS- DNA, BODY FLUIDS	8600	8600	8600
KLO25-2382	CRYPTOCOCCUS NEOFORMANS- DNA, CSF	7600	7600	7600
KLO25-2383	CRYPTOCOCCUS NEOFORMANS- DNA, SPUTUM	8600	8600	8600
KLO25-2384	CRYPTOCOCCUS NEOFORMANS- DNA, TISSUE	8600	8600	8600
KLO25-2385	CRYPTOCOCCUS NEOFORMANS, DNA, -PCR	9480	9480	9480
KLO25-2386	CRYPTOSPORDIUM/ISOSPORA IDENTIFICATION, STOOL	490	490	490
KLO25-2387	CRYPTOSPORIDIUM ANTIGEN, STOOL	2500	2500	2500
KLO25-2388	CRYTOCOCCUS NEOFORMS DETECTION, PCR	9500	9500	9500
KLO25-2389	CSF & SERUM PROTEIN ELECTROPHORESIS / OLIGOCLONAL BANDS	5000	5000	5000
KLO25-2390	CSF INDEX , CSF & SERUM	2000	2000	2000
KLO25-2391	CSF LEAKAGE EVALUATION (NASAL/EAR DISCHARGE)	5900	5900	5900
KLO25-2392	CULTURE AFB (MYCOBACTERIUM) ANTITUBERCULAR DRUG	22000	22000	22000
KLO25-2393	CULTURE 15 DRUG SENSITIVITY	18100	18100	18100
KLO25-2394	CULTURE AFB SENSITIVITY-LEVOFLOXACIN	3100	3100	3100
KLO25-2395	CULTURE AFB SUSPECTIBILITY- ERYTHROMYCIN	2500	2500	2500
KLO25-2396	CULTURE BORDETELLA	1300	1300	1300
KLO25-2397	CULTURE ESBL (EXTENDED SPECTRUM BETA-LACTAMASE), SCREENING	840	840	840
KLO25-2398	CULTURE GROUP B STREPTOCOCCUS(GBS) , Does not include sensitivity	1050	1050	1050
KLO25-2399	CULTURE KPC (CARBAPENEMASE), SCREENING	900	900	900
KLO25-2400	CULTURE MALASSAZIA	1400	1400	1400
KLO25-2401	CULTURE MRSA (METHICILLIN RESISTANT STAPHYLOCOCCUS AUREUS), SCREENING	900	900	900
KLO25-2402	CULTURE, GONOCOCCUS DOES NOT INCLUDE ANTIBIOTIC SENSITIVITY	1200	1200	1200
KLO25-2403	CULTURE, NOCARDIA DOES NOT INCLUDE ANTIBIOTIC SENSITIVITY	1400	1400	1400
KLO25-2404	CULTURE, ACTINOMYCES	1300	1300	1300
KLO25-2405	CULTURE, AFB - 10 DRUG SENSITIVITY	11900	11900	11900
KLO25-2406	CULTURE, AFB - 11 DRUG SENSITIVITY	12500	12500	12500
KLO25-2407	CULTURE, AFB - 12 DRUG SENSITIVITY	13600	13600	13600
KLO25-2408	CULTURE, AFB - 4 DRUG SENSITIVITY	5100	5100	5100
KLO25-2409	CULTURE, AFB - 5 DRUG SENSITIVITY	6800	6800	6800
KLO25-2410	CULTURE, AFB SENSITIVITY, MOXIFLOXACIN	4200	4200	4200
KLO25-2411	CULTURE, ANAEROBIC	1400	1400	1400
KLO25-2412	CULTURE, ANAEROBIC DOES NOT INCLUDE BLOOD SAMPLES. INCLUDES ANTIBIOTIC SENSITIVITY IF IND	1000	1000	1000
KLO25-2413	CULTURE, ANAEROBIC, BLOOD, RAPID INCLUDES ANTIBIOTIC SENSITIVITY IF INDICATED.	830	830	830
KLO25-2414	CULTURE, ANAEROBIC, BODY FLUID,RAPID INCLUDES ANTIBIOTIC SENSITIVITY IF INDICATED.	830	830	830
KLO25-2415	CULTURE, CLOSTRIDIUM DIFFICILE	1400	1400	1400
KLO25-2416	CULTURE, CSF (ANAEROBIC)	1200	1200	1200
KLO25-2417	CULTURE, DIPTHERIA	1320	1320	1320
KLO25-2418	CULTURE, HAEMOPHILUS DUCREYI	1220	1220	1220
KLO25-2419	CULTURE, HELICOBACTER PYLORI	1300	1300	1300

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2420	CULTURE, LISTERIA	900	900	900
KLO25-2421	CULTURE, MYCOBACTERIUM ATYPICAL(NON TUBERCULOUS MYCOBACTERIUM-NTM)	2500	2500	2500
KLO25-2422	CULTURE, STOOL (CAMPYLOBACTER)	1400	1400	1400
KLO25-2423	CULTURE, TRICHOMONAS VAGINALIS	900	900	900
KLO25-2424	CULTURE, WATER PRESUMPTIVE COLIFORM COUNT	950	950	950
KLO25-2425	CULTURED AFB (MYCOBACTERIUM),ANTITUBERCULAR DRUG SENSITIVITY,Rapid Single Drug * Clarithro	3150	3150	3150
KLO25-2426	CULTURED AFB (MYCOBACTERIUM),ANTITUBERCULAR DRUG SENSITIVITY,Rapid19 Drugs Panel	24900	24900	24900
KLO25-2427	CULTURED AFB ANTITUBERCULAR DST, 16 DRUGS PANEL	21000	21000	21000
KLO25-2428	CULTURED AFB ANTITUBERCULAR DST, LINEZOLID	3600	3600	3600
KLO25-2429	CULTURED AFB ANTITUBERCULAR DST, RAPID 10 SECOND LINE DRUGS PANEL	11900	11900	11900
KLO25-2430	CULTURED AFB ANTITUBERCULAR DST, RAPID 5 SECOND LINE DRUGS PANEL	6800	6800	6800
KLO25-2431	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , AMIKACIN	3100	3100	3100
KLO25-2432	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , ANY ONE	2700	2700	2700
KLO25-2433	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , CAPREOMYCIN	3100	3100	3100
KLO25-2434	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , CLOFAZIMINE	3100	3100	3100
KLO25-2435	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , ETHAMBUTOL	3100	3100	3100
KLO25-2436	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , ETHIONAMIDE	3100	3100	3100
KLO25-2437	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , ISONIAZID	3100	3100	3100
KLO25-2438	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , KANAMYCIN	3100	3100	3100
KLO25-2439	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , OFLOXACIN	3100	3100	3100
KLO25-2440	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , PAS	3100	3100	3100
KLO25-2441	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , PYRAZINAMIDE	4300	4300	4300
KLO25-2442	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , RIFAMPICIN	3100	3100	3100
KLO25-2443	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY , STREPTOMYCIN	3100	3100	3100
KLO25-2444	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY CYCLOSERINE	3100	3100	3100
KLO25-2445	CULTURED AFB ANTITUBERCULAR DRUG SENSITIVITY. RIFABUTIN	3500	3500	3500
KLO25-2446	CULTURED AFB ANTITUBERCULAR DST, 4 DRUGS PANEL	5100	5100	5100
KLO25-2447	CULTURED AFB ANTITUBERCULAR DST, 5 DRUGS PANEL	6800	6800	6800
KLO25-2448	CULTURED MOLD ANTIFUNGAL DRUG SENSITIVITY	11300	11300	11300
KLO25-2449	CUTIS-LAXA GENE PANEL (M)	36000	36000	36000
KLO25-2450	CYANIDE	6710	6710	6710
KLO25-2451	CYCLIC AMP, PLASMA, CYCLIC ADENOSINE MONOPHOSPHATE	7470	7470	7470
KLO25-2452	CYCLIC AMP, RANDOM URINE, CYCLIC ADENOSINE MONOPHOSPHATE	9000	9000	9000
KLO25-2453	CYCLOSPORINE	2725	2725	2725
KLO25-2454	CYCLOSPORINE A	2600	2600	2600
KLO25-2455	CYCLOSPORINE, LC-MS/MS	2890	2890	2890
KLO25-2456	CYP2C19 GENOTYPING	9000	9000	9000
KLO25-2457	CYP2C9*2,CYP2C9*3 & VKORC1 MUTATION, BLOOD-PCR	14975	14975	14975
KLO25-2458	CYP2D6 (CYTOCHROME P450 2D6) ALLELES (BS)	5400	5400	5400
KLO25-2459	CYP2D6*4 & CYP2D6*10 MUTATION, BLOOD-PCR	6550	6550	6550
KLO25-2460	CYP3A4*22 GENOTYPING	7400	7400	7400
KLO25-2461	CYSTATIN C, SERUM	1300	1300	1300
KLO25-2462	CYSTIC FIBROSIS EXTENDED MUTATION PANEL	30000	30000	30000
KLO25-2463	CYSTIC FIBROSIS (4 COMMON MUTATION) (LI)	12000	12000	12000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2464	CYSTIC FIBROSIS (BS)	28600	28600	28600
KLO25-2465	CYSTIC FIBROSIS (CFTR) DEL F508 MUTATION ANALYSIS (M)	8000	8000	8000
KLO25-2466	CYSTIC FIBROSIS (CFTR) GENE ANALYSIS (M)	20000	20000	20000
KLO25-2467	CYSTIC FIBROSIS (CFTR) GENE PANEL DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-2468	CYSTIC FIBROSIS (DELTA 508)-(LI)	5500	5500	5500
KLO25-2469	CYSTIC FIBROSIS GENE MUTATION	13000	13000	13000
KLO25-2470	CYSTIC FIBROSIS MUTATION DETECTION	9000	9000	9000
KLO25-2471	CYSTIC FIBROSIS MUTATION SCREENING TEST (G)	4550	4550	4550
KLO25-2472	CYSTIC FIBROSIS NEONATAL SCREEN	600	600	600
KLO25-2473	CYSTIC FIBROSIS SCREEN	12000	12000	12000
KLO25-2474	CYSTIC FIBROSIS, NEWBORN, SCREEN	700	700	700
KLO25-2475	CYSTIC MEGALENCEPHALY (MLC1) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-2476	CYSTIC MEGALENCEPHALY (MLC1) GENE ANALYSIS (M)	20000	20000	20000
KLO25-2477	CYSTICERCOSIS (TAENIA SOLIUM)CSF,IGG	1400	1400	1400
KLO25-2478	CYSTINE	7500	7500	7500
KLO25-2479	CYSTINE, 24 HOUR URINE	8700	8700	8700
KLO25-2480	CYSTINE, QUANTITATIVE, URINE	9630	9630	9630
KLO25-2481	CYSTINE, SCREEN URINE	7500	7500	7500
KLO25-2482	CYTOGENETICS + MICRODELETION PANEL + SUBTELOMERIC DELETION/DUPLICATION PANEL (BS)	15600	15600	15600
KLO25-2483	CYTOGENETICS + MICRODELETION PANEL +SUBTELOMERIC DELETION/DUPLICATION PANEL (BS)	13200	13200	13200
KLO25-2484	CYTOGENETICS FROM FRAGILE X	8600	8600	8600
KLO25-2485	CYTOKERATIN 19	2130	2130	2130
KLO25-2486	CYTOLOGY, CELL BLOCK EXAMINATION	700	700	700
KLO25-2487	CYTOMEGALOVIRUS (CMV) ANTIBODY, IgG	640	640	640
KLO25-2488	CYTOMEGALOVIRUS (CMV) ANTIBODY, IgM	640	640	640
KLO25-2489	CYTOMEGALOVIRUS (CMV) IGG ADVANTAGE	1050	1050	1050
KLO25-2490	CYTOMEGALOVIRUS (CMV), DNA QUALITATIVE PCR, PLASMA	4200	4200	4200
KLO25-2491	CYTOMEGALOVIRUS (CMV), DNA QUALITATIVE PCR, SALIVA	4200	4200	4200
KLO25-2492	CYTOMEGALOVIRUS (CMV), DNA QUALITATIVE PCR, URINE	4200	4200	4200
KLO25-2493	CYTOMEGALOVIRUS (CMV), DNA QUALITATIVE PCR,CSF	4200	4200	4200
KLO25-2494	CYTOMEGALOVIRUS (CMV), DNA QUALITATIVE, AMNIOTIC FLUID	4200	4200	4200
KLO25-2495	CYTOMEGALOVIRUS (MCV) DNA QUANTITATIVE PCR	9300	9300	9300
KLO25-2496	CYTOMEGALOVIRUS AVIDITY IgG	1100	1100	1100
KLO25-2497	CYTOMEGALOVIRUS AVIDITY IGG. (L)	640	640	640
KLO25-2498	CYTOMEGALOVIRUS, INTERFERON GAMMA RELEASE ASSAY (IGRA)	5000	5000	5000
KLO25-2499	CYTOMEGALOVIRUS, PCR	4200	4200	4200
KLO25-2500	CYTOPERFECT MICROARRAY TEST (2.7 MILLION PROBES) (G)	44200	44200	44200
KLO25-2501	D3 -HYDROXYBUTARATE (KETONE)	1700	1700	1700
KLO25-2502	D3-HYDROXYBUTYRATE(RANBUT)	3000	3000	3000
KLO25-2503	Data Analysis Of CES/WES- Duo	7000	7000	7000
KLO25-2504	Data Analysis Of CES/WES- Individual	5000	5000	5000
KLO25-2505	Data Analysis Of CES/WES- Trio	10000	10000	10000
KLO25-2506	DCP-PIVKA (PROTEIN INDUCED BY VITAMIN K ABSENCE) (DCP),PLASMA	4000	4000	4000
KLO25-2507	DCX GENE DELETION DUPLICATION FOR ISOLATED LISSENCEPHALY SEQUENCE (ILS) (M)	20000	20000	20000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2508	DEAFNESS GENE PANEL (BS)	44400	44400	44400
KLO25-2509	DEAFNESS GENE PANEL (M)	17000	17000	17000
KLO25-2510	DEEP VEIN THROMBOSIS PANEL	14000	14000	14000
KLO25-2511	DENGUE & CHIKUNGUNYA VIRUSES, PCR QUALITATIVE	4500	4500	4500
KLO25-2512	DENGUE DETECTION QUALITATIVE	3200	3200	3200
KLO25-2513	DENGUE DETECTION, PCR	4040	4040	4040
KLO25-2514	DENGUE VIRUS RNA, RT-PCR	20220	20220	20220
KLO25-2515	DENGUE VIRUS, RNA DETECTION PCR,	4040	4040	4040
KLO25-2516	DENGUE VIRUS, RNA DETECTION, PCR, SERUM/PLASMA	4040	4040	4040
KLO25-2517	DEOXYCORTICOSTEONE	15600	15600	15600
KLO25-2518	DEOXYPYRIDINOLINE URINE (DPYD)	2450	2450	2450
KLO25-2519	DES-GAMMA CARBOXY PROTHROMBIN (DCP/PIVKA II), SERUM	4000	4000	4000
KLO25-2520	DESIPRAMINE	6080	6080	6080
KLO25-2521	DESMOGLEIN (DSG) 1 & 3 ANTIBODY	5800	5800	5800
KLO25-2522	DESMOGLEIN I ANTIBODY, SERUM	2800	2800	2800
KLO25-2523	DESMOGLEIN III ANTIBODY, SERUM	3000	3000	3000
KLO25-2524	DEXAMETHASONE	9100	9100	9100
KLO25-2525	DEXAMETHASONE HIGH DOSE SUPPRESSION TEST FOR ACTH	2500	2500	2500
KLO25-2526	DEXAMETHASONE LOW DOSESUPPRESSION TEST FOR ACTH	2500	2500	2500
KLO25-2527	DEXAMETHASONE OVERNIGHT SUPPRESSION TEST FOR ACTH	1600	1600	1600
KLO25-2528	DEXAMETHASONE SUPRESSION TEST FOR CORTISOL - LOW DOSE - PER SPECIMEN	600	600	600
KLO25-2529	DEXAMETHASONE SUPRRESION TEST FOR CORTISOL - HIGH DOSE - PER SPECIMEN	1200	1200	1200
KLO25-2530	DEXAMETHASONE, BY ACTH	2500	2500	2500
KLO25-2531	DF-MMP-3	5000	5000	5000
KLO25-2532	DGS2-10P14.(L)	6540	6540	6540
KLO25-2533	DHEA, DEHYDROEPIANDROSTERONE	2600	2600	2600
KLO25-2534	DHR & NBT SCREENING	7000	7000	7000
KLO25-2535	DIAMOND BLACKFAN ANEMIA GENE PANEL (M)	36000	36000	36000
KLO25-2536	DIAZEPAM	12400	12400	12400
KLO25-2537	DIFFERENTIAL DIAGNOSIS OF MEDIASTINAL MASS (CD3,CD45, PANCYTOKERATIN,TDT)	4330	4330	4330
KLO25-2538	DI-GEORGE SYNDROME (BS)	6600	6600	6600
KLO25-2539	DIGEORGE/VCFS REGION (22Q11.2) (L)	5600	5600	5600
KLO25-2540	DIGITOXIN	13300	13300	13300
KLO25-2541	DIGOXIN (LANOXIN)	1000	1000	1000
KLO25-2542	DIHYDROTESTOSTERONE (DHT)	3000	3000	3000
KLO25-2543	DIHYDROTESTOSTERONE, DHT, FREE	25700	25700	25700
KLO25-2544	DIPHTHERIA, PERTUSSIS, TETANUS IGG ANTIBODY PANEL, SERUM	6000	6000	6000
KLO25-2545	DIPTHERIA-IGG ANTIBODIES, SERUM	2500	2500	2500
KLO25-2546	DISOPYRAMIDE (NORPACE, REGUBEAT)	8760	8760	8760
KLO25-2547	DISSEMINATED INTRAVASCULAR COAGULATION PROFILE	3200	3200	3200
KLO25-2548	DMD (79 EXONS)/DMD CARRIER SCREENING (BS)	18000	18000	18000
KLO25-2549	DMD (PRENATAL/POSTNATAL) (G)	11500	11500	11500
KLO25-2550	DMD- DUCHENNE MUSCULAR DYSTROPHY -GENE MUTATION	8100	8100	8100
KLO25-2551	DMD MUTATION (26 EXONS) (BS)	6000	6000	6000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2552	DMD/BMD-79 EXONS DELETION	15900	15900	15900
KLO25-2553	DMD-DUCHENNE MUSCULAR DYSTROPHY TEST, -PCR, AMNIOTIC FLUID	5500	5500	5500
KLO25-2554	DMD-DUCHENNE MUSCULAR DYSTROPHY TEST, -PCR, BLOOD	6200	6200	6200
KLO25-2555	DMD-DUCHENNE MUSCULAR DYSTROPHY TEST, PCR, CVS	5500	5500	5500
KLO25-2556	DNA ANALYSIS - PATERNAL Y CHORMOSOME (PER INDIVIDUAL)	10000	10000	10000
KLO25-2557	DNA ANALYSIS - PATERNITY TESTING (PER INDIVIDUAL)	5000	5000	5000
KLO25-2558	DNA ANALYSIS -KINSHIP TESTING (PER INDIVIDUAL)	5000	5000	5000
KLO25-2559	DNA Extraction & MCC testing	4000	4000	4000
KLO25-2560	DNA EXTRACTION & STORAGE	2420	2420	2420
KLO25-2561	DNA EXTRACTION FROM AMNIOTIC FLUID	2000	2000	2000
KLO25-2562	DNA EXTRACTION FROM BLOOD	1400	1400	1400
KLO25-2563	DNA EXTRACTION FROM CVS	2000	2000	2000
KLO25-2564	DNA FRAGMENTATION TEST	8000	8000	8000
KLO25-2565	DNA HISTOGRAM BREAST TISSUE DNA PLOIDY - S PHASE	4500	4500	4500
KLO25-2566	DNA HISTOGRAM HYDATIDIFORM MOLE DNA PLOIDY - S PHASE	3310	3310	3310
KLO25-2567	DNA HISTOGRAM SOLID TUMOR DNA PLOIDY S PHASE	3310	3310	3310
KLO25-2568	DNA HISTOGRAM URINE/BLADDER WASHING OR OTHER FLUID	3310	3310	3310
KLO25-2569	DNA HISTOGRAM, BLOOD/BONE MARROW DNA PLOIDY - S PHASE	3310	3310	3310
KLO25-2570	DNA HISTOGRAM, ENDOMETRIAL TISSUE DNA PLOIDY S PHASE	3310	3310	3310
KLO25-2571	DNA HISTOGRAM, OVAIAN TISSUE DNA PLOIDY - S PHASE	3370	3370	3370
KLO25-2572	DNA HISTOGRAM, PROSTATE TISSUE DNA PLOIDY - S PHASE	3370	3370	3370
KLO25-2573	DNA ISOLATION, BLOOD	1200	1200	1200
KLO25-2574	DNA ISOLATION, TISSUE	1200	1200	1200
KLO25-2575	DNA PATERNITY	10500	10500	10500
KLO25-2576	DNA PLOIDY	5000	5000	5000
KLO25-2577	DNA PLOIDY & CELL CYCLE ANALYSIS	5000	5000	5000
KLO25-2578	DNA PROFILING/FINGER PRINTING FOR ESTABLISHING PATERNITY/KINSHIP/LINEAGE STUDIES	10800	10800	10800
KLO25-2579	DNA Retrieval Charges	1500	1500	1500
KLO25-2580	DNA STORAGE (LI)	3500	3500	3500
KLO25-2581	DNA-BASED WEIGHT MANAGEMENT PROGRAM [HEREIN WE SCREEN GENES SUCH AS FTO, TCF7L2, MTNR	33000	33000	33000
KLO25-2582	DNPH TEST URINE	170	170	170
KLO25-2583	DOCK8 (HYPER IGE SYNDROME) GENE SEQUENCING (M)	36000	36000	36000
KLO25-2584	DOLOPHINE (METHADONE), URINE	835	835	835
KLO25-2585	DONOR DERIVED CELL FREE DNA ; % DD-CFDNA	33000	33000	33000
KLO25-2586	DOPAMINE, PLASMA	3750	3750	3750
KLO25-2587	DOPAMINE, URINE 24 HOURS	3000	3000	3000
KLO25-2588	DOUBLE NEGATIVE T CELLS (DNT)	4300	4300	4300
KLO25-2589	DOXEPIN	9600	9600	9600
KLO25-2590	DPD-GENE MUTATIONS, BLOOD-PCR	7630	7630	7630
KLO25-2591	DPT ANTIBODIES, SERUM	6975	6975	6975
KLO25-2592	DPYD (DEOXYPYRIDINOLINE), URINE	2450	2450	2450
KLO25-2593	DPYD IVS14+1G>A MUTATION ANALYSIS (M)	10000	10000	10000
KLO25-2594	DPYD WHOLE GENE ANALYSIS (FOR 5 FU TOXICITY EVALUATION) (M)	36000	36000	36000
KLO25-2595	DRAVET SYNDROME (SCN1A) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2596	DRAVET SYNDROME (SCN1A) GENE ANALYSIS (M)	17000	17000	17000
KLO25-2597	DRPLA GENE ANALYSIS (L)	6530	6530	6530
KLO25-2598	DRPLA GENE ANALYSIS AUTOSOMAL DOMINAT ATAXIA	7000	7000	7000
KLO25-2599	DRT	7500	7500	7500
KLO25-2600	DRUG OF ABUSE - 12 PANEL	6490	6490	6490
KLO25-2601	DRUG OF ABUSE - ANY ONE	1200	1200	1200
KLO25-2602	DRUG OF ABUSE PANEL -9	5400	5400	5400
KLO25-2603	DRUG OF ABUSE PANEL-10	7400	7400	7400
KLO25-2604	DRUG OF ABUSE PANEL-5 ,	2730	2730	2730
KLO25-2605	DRUG OF ABUSE PANEL-6,	4400	4400	4400
KLO25-2606	DRUG OF ABUSE PANEL-9,	4900	4900	4900
KLO25-2607	DRUG OF ABUSE, 5 DRUGS WITH CONFIRMATION	5000	5000	5000
KLO25-2608	DRUG PANEL 7	4700	4700	4700
KLO25-2609	DRUG PANEL-11	8100	8100	8100
KLO25-2610	DRUG SCREEN-URINE	3520	3520	3520
KLO25-2611	DUAL MARKER + PLGF (L)	2950	2950	2950
KLO25-2612	DUCHENNE MUSCULAR DYSTROPHY	17000	17000	17000
KLO25-2613	DUCHENNE MUSCULAR DYSTROPHY (DMD) DELETION/DUPLICATION ANALYSIS (M)	6500	6500	6500
KLO25-2614	DUCHENNE MUSCULAR DYSTROPHY (DMD) GENE ANALYSIS - NGS (M)	17000	17000	17000
KLO25-2615	DUCHENNE MUSCULAR DYSTROPHY (DMD/BMD) GENE MUTATION	8100	8100	8100
KLO25-2616	Duchenne Muscular Dystrophy For MLPA	12000	12000	12000
KLO25-2617	DVT- PANEL DEEP VEIN THROMBOSIS	14000	14000	14000
KLO25-2618	D-XYLOSE, URINE	1710	1710	1710
KLO25-2619	DYSFERLINOPATHY/LGMD2A (CAPN3) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-2620	DYSFERLINOPATHY/LGMD2B (DYSF) DELETION/DUPLICATION ANALYSIS (M)	10000	10000	10000
KLO25-2621	DYSKERATOSIS CONGENITA GENE PANEL (M)	36000	36000	36000
KLO25-2622	Dysmorphology And Basic Autopsy Studies Of Aborted Fetus	10000	10000	10000
KLO25-2623	DYSTONIA GENE PANEL (BS)	44400	44400	44400
KLO25-2624	DYSTONIA GENE PANEL (M)	25000	25000	25000
KLO25-2625	E COLI K1 GROUP B, ANTIGEN DETECTION, CSF	1310	1310	1310
KLO25-2626	E COLI K1 GROUP B, ANTIGEN DETECTION, SERUM	1310	1310	1310
KLO25-2627	E COLI K1 GROUP B, ANTIGEN DETECTION, URINE	1310	1310	1310
KLO25-2628	E. COLI ANTIGEN	2890	2890	2890
KLO25-2629	E3-ESTRIOL, UNCONJUGATED,URINE	1380	1380	1380
KLO25-2630	EARLY INFANTILE EPILEPTIC ENCEPHALOPATHY GENE PANEL (BS)	45600	45600	45600
KLO25-2631	EARLY INFANTILE EPILEPTIC ENCEPHALOPATHY-4 (STXBP1) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-2632	EARLY-ONSET JUVENILE PARKINSONISM GENE PANEL (M)	25000	25000	25000
KLO25-2633	EBSTEIN BARR VIRUS QUALITATIVE DETECTION (BS)	5400	5400	5400
KLO25-2634	EBV ANTIBODY (INFECTIOUS MONONUCLEOSIS)PANEL, IFA	5470	5470	5470
KLO25-2635	EBV DNA DETECTION (QUALITATIVE)	4360	4360	4360
KLO25-2636	EBV DNA DETECTION BY PCR	7000	7000	7000
KLO25-2637	EBV DNA DETECTION BY PCR, CSF	4580	4580	4580
KLO25-2638	EBV DNA DETECTION BY PCR, TISSUE	4250	4250	4250
KLO25-2639	EBV DNA DETECTION BY PCR,SPUTUM	3500	3500	3500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2640	EBV -IgG ANTIBODY TO EARLY ANTIGEN	2180	2180	2180
KLO25-2641	ECHINOCOCCUS (HYDATID SEROLOGY) IGG	1860	1860	1860
KLO25-2642	ECHINOCOCCUS GRANULOSUS ANTIBODY, WESTERN BLOT IGG	20000	20000	20000
KLO25-2643	ECHOVIRUS ANTIBODIES PANEL, IGG & IGM	6220	6220	6220
KLO25-2644	ECHOVIRUS ANTIBODY IGG	2850	2850	2850
KLO25-2645	ECHOVIRUS ANTIBODY IGM	2850	2850	2850
KLO25-2646	ECOLI OS157 ANTIGEN DETECTION	2700	2700	2700
KLO25-2647	ECTODERMAL DYSPLASIA GENE PANEL (M)	17000	17000	17000
KLO25-2648	EFT/PNET FUSION TRANSCRIPT ANALYSIS (M)	8500	8500	8500
KLO25-2649	EGFR (EXONS 18-21) MUTATION DETECTION, FFPE & LIQUID BIOPSY	10800	10800	10800
KLO25-2650	EGFR GENE ANALYSIS (HOT SPOTS - EXONS 18, 19, 20, 21) (M)	8500	8500	8500
KLO25-2651	EGFR MUTATION ANALYSIS	7600	7600	7600
KLO25-2652	EGFR MUTATION BY PCR, TISSUE	5900	5900	5900
KLO25-2653	EGFR MUTATION DETECTION, L858	6250	6250	6250
KLO25-2654	EHLER DANLOS SYNDROME GENE PANEL (M)	25000	25000	25000
KLO25-2655	EHLERS-DANLOS SYNDROME TYPE VI (PLOD1) DELETION/DUPLICATION ANALYSIS (M)	17000	17000	17000
KLO25-2656	ELECTRON MICROSCOPY	7600	7600	7600
KLO25-2657	ELECTROPHORESIS PROTEIN, WITH IFE	7200	7200	7200
KLO25-2658	ELECTROPHORESIS PROTEIN, 24 HRS. URINE	4200	4200	4200
KLO25-2659	ELECTROPHORESIS PROTEIN, CSF	6500	6500	6500
KLO25-2660	ELECTROPHORESIS PROTEIN, OLIGOCLONAL BANDS CSF	3900	3900	3900
KLO25-2661	ELECTROPHORESIS PROTEIN, URINE RANDOM	6090	6090	6090
KLO25-2662	ELF (ENCHANCED LIVER FIBROSIS)	5500	5500	5500
KLO25-2663	ENDOMETRIAL CANCER PANEL BY NGS	53550	53550	53550
KLO25-2664	ENDOMYSIAL ANTIBODY, IGA	2400	2400	2400
KLO25-2665	ENDOMYSIAL ANTIBODY, IGG	3270	3270	3270
KLO25-2666	ENDOMYSIAL IgA WITH TITRE	5000	5000	5000
KLO25-2667	ENDOPHTHALMITIS PANEL BY PCR-10 BACTERIA & FUNGI	10500	10500	10500
KLO25-2668	ENDOTOXIN	3200	3200	3200
KLO25-2669	ENDOTOXIN ASSAY	8900	8900	8900
KLO25-2670	ENHANCED FIRST TRIMESTER (eFTS)	3000	3000	3000
KLO25-2671	Enhanced First Trimester Screening And Thalassemia/ Hemoglobinopathy Screening Via Hb-HPLC	4500	4500	4500
KLO25-2672	ENHANCED LIVER FIBROSIS (L)	4900	4900	4900
KLO25-2673	ENTAMOEBA ANTIGEN TEST , RAPID, STOOL	700	700	700
KLO25-2674	ENTAMOEBA HISTOLYTICA ANTIBODY. EIA	3000	3000	3000
KLO25-2675	ENTEROHEMORRHAGIC E. COLI, VEROTOXIN 1 & 2 ANTIGEN	2520	2520	2520
KLO25-2676	ENTEROVIRUS ANTIBODY PANEL (IGG & IGM)	17440	17440	17440
KLO25-2677	ENTEROVIRUS ANTIGEN, STOOL	1800	1800	1800
KLO25-2678	ENTEROVIRUSES RNA DETECTION, CSF	6030	6030	6030
KLO25-2679	ENTEROVIRUSES RNA DETECTION, PCR, PLASMA	6145	6145	6145
KLO25-2680	EOC- EPITHELIAL OVARIAN CANCER HE4, SERUM	3130	3130	3130
KLO25-2681	EP300 (RUBINSTEIN-TAYBI SYNDROME) - DELETION (M)	20000	20000	20000
KLO25-2682	EPIDERMAL GROWTH FACTOR RECEPTOR	7960	7960	7960
KLO25-2683	EPIDERMOLYSIS BULLOSA GENE PANEL (M)	17500	17500	17500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2684	EPILEPSY PANEL	25000	25000	25000
KLO25-2685	EPILEPTIC ENCEPHALOPATHY GENE PANEL (M)	25000	25000	25000
KLO25-2686	EPINEPHRINE, (ADRENALINE), 24 HOUR URINE	3190	3190	3190
KLO25-2687	EPINEPHRINE, (ADRENALINE), PLASMA	3250	3250	3250
KLO25-2688	EPISODIC ATAXIA COMPREHENSIVE PROFILE, HOTSPOT	13000	13000	13000
KLO25-2689	EPISODIC ATAXIA GENE PANEL (M)	33000	33000	33000
KLO25-2690	EPISODIC ATAXIA TYPE 1, KCNA1 GENE MUTATION	9200	9200	9200
KLO25-2691	EPISODIC ATAXIA TYPE 2, CACNA1A GENE MUTATION	9200	9200	9200
KLO25-2692	EPSTEIN - BARR VIRUS ANTIBODY TO EARLY ANTIGEN (D) IGG	9000	9000	9000
KLO25-2693	EPSTEIN - BARR VIRUS ANTIBODY TO NUCLEAR ANTIGEN (EBNA) IGG	8300	8300	8300
KLO25-2694	EPSTEIN - BARR VIRUS IGG ANTIBDOY TO VIRAL CAPSID ANTIGEN	1830	1830	1830
KLO25-2695	EPSTEIN - BARR VIRUS PANEL	3000	3000	3000
KLO25-2696	EPSTEIN BARR VIRUS ANTIBODIES TETRA PANEL	6500	6500	6500
KLO25-2697	EPSTEIN BARR VIRUS IGM ANTIBODY TO VIRAL CAPSID ANTIGEN	1800	1800	1800
KLO25-2698	EPSTEIN-BARR VIRUS (EBV) DNA PCR	6500	6500	6500
KLO25-2699	EPSTEIN-BARR VIRUS (EBV) DNA QUALITATIVE RT PCR	4300	4300	4300
KLO25-2700	EPSTEIN-BARR VIRUS (EBV) DNA QUANTITATIVE RT PCR	11020	11020	11020
KLO25-2701	ER & PR	2600	2600	2600
KLO25-2702	ER (ESTROGEN RECEPTOR)	1600	1600	1600
KLO25-2703	ERYTHROPOIETIN (EPO)	2300	2300	2300
KLO25-2704	ERYTHROPOIETIN ANTIBODY,SERUM	2400	2400	2400
KLO25-2705	ESR; AUTOMATED/ WESTERGEN ERYTHROCYTE SEDIMENTATION RATE	200	200	200
KLO25-2706	ESTRO ESSENCE METABOLISM PANEL	19100	19100	19100
KLO25-2707	ESTROGEN, TOTAL	11700	11700	11700
KLO25-2708	ESTRONE	6360	6360	6360
KLO25-2709	ETHOSUXIMIDE	9300	9300	9300
KLO25-2710	EVEROLIMUS (L)	5000	5000	5000
KLO25-2711	EVEROLIMUS -LC-MS	7000	7000	7000
KLO25-2712	EWS-FLI GENE TEST	12840	12840	12840
KLO25-2713	EWSR1 GENE EWINGS SARCOMA	7000	7000	7000
KLO25-2714	EXOME MAX (Enhanced Whole Exome (CNV) + Mitochondrial Genome Sequencing)	25000	25000	25000
KLO25-2715	EXTRACTABLE NUCLEAR ANTIGENS (ENA)/ANTI NUCLEAR ANTIBODIES(ANA) QUALITATIVE PROFILE 18 AN	6000	6000	6000
KLO25-2716	EXTRACTABLE NUCLEAR ANTIGENS (ENA)/ANTI NUCLEAR ANTIBODIES(ANA) QUALITATIVE PROFILE 23 AN	8400	8400	8400
KLO25-2717	FABRY DISEASE (GLA) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-2718	FABRY DISEASE (GLA) GENE ANALYSIS (M)	21090	21090	21090
KLO25-2719	FABRY DISEASE, QUANTITATIVE, BLOOD	2200	2200	2200
KLO25-2720	FACTOR II (G20210 A) (BS)	3600	3600	3600
KLO25-2721	FACTOR II FUNCTIONAL	7800	7800	7800
KLO25-2722	FACTOR IX ACTIVITY, CLOTTING	2200	2200	2200
KLO25-2723	FACTOR IX FUNCTIONAL	1900	1900	1900
KLO25-2724	FACTOR V (G1691A) (BS)	3600	3600	3600
KLO25-2725	FACTOR V LEIDEN (F8) MUTATION ANALYSIS (EXON 10) (M)	15000	15000	15000
KLO25-2726	FACTOR V LEIDEN MUTATION ANALYSIS	5900	5900	5900
KLO25-2727	FACTOR V, FUNCTIONAL	3780	3780	3780

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2728	FACTOR VII DEFICIENCY (F7) GENE ANALYSIS (M)	30000	30000	30000
KLO25-2729	FACTOR VII FUNCTIONAL	2900	2900	2900
KLO25-2730	FACTOR VII R353Q MUTATION ANALYSIS	23500	23500	23500
KLO25-2731	FACTOR VIII ACTIVITY	3000	3000	3000
KLO25-2732	FACTOR VIII FUNCTIONAL	2200	2200	2200
KLO25-2733	FACTOR VIII INHIBITOR	7000	7000	7000
KLO25-2734	FACTOR VIII STUDIES FACTOR VIII ASSAY	2000	2000	2000
KLO25-2735	FACTOR X FUNCTIONAL	5030	5030	5030
KLO25-2736	FACTOR Xa ANTIBODY, BLOOD	5670	5670	5670
KLO25-2737	FACTOR XI FUNCTIONAL	4070	4070	4070
KLO25-2738	FACTOR XI, MUTATION ANALYSIS	6380	6380	6380
KLO25-2739	FACTOR XII FUNCTIONAL	3710	3710	3710
KLO25-2740	FACTOR XIII, ACTIVITY	2690	2690	2690
KLO25-2741	FACTOR XIII, CLOT SOLUBILITY, FUNCTIONAL, QUALITATIVE	390	390	390
KLO25-2742	FAMILIAL FEMALE MENTAL RETARDATION/EPILEPSY GENE PANEL (M)	17000	17000	17000
KLO25-2743	FAMILIAL HEMIPLEGIC MIGRAINE GENE PANEL (M)	25000	25000	25000
KLO25-2744	FAMILIAL MEDITERRANEAN FEVER MUTATION ANALYSIS	15900	15900	15900
KLO25-2745	FANCONI ANEMIA GENE PANEL (M)	30000	30000	30000
KLO25-2746	FANCONI BICKEL SYNDROME (SLC2A2) GENE ANALYSIS (M)	25000	25000	25000
KLO25-2747	FANCONIS ANEMIA, STRESS -CYTOGENETICS	9110	9110	9110
KLO25-2748	FARBER LIPOGRANULOMATOSIS - ASAH1 - GENE ANALYSIS (M)	25000	25000	25000
KLO25-2749	FATTY ACID OXIDATION DISORDERS GENE PANEL (M)	17000	17000	17000
KLO25-2750	FATTY ACIDS WITH VERY LONG CHAIN (C22 TO C26),PLASMA	29800	29800	29800
KLO25-2751	FATTY LIVER INDEX	550	550	550
KLO25-2752	FDP DR70	3750	3750	3750
KLO25-2753	FEBRILE AGGLUTINING PANEL	1480	1480	1480
KLO25-2754	FEBRILE NEUTROPENIA PANEL	42270	42270	42270
KLO25-2755	FECAL ELASTASE	7280	7280	7280
KLO25-2756	FECAL IMMUNOCHEMICAL TEST (FIT)	4900	4900	4900
KLO25-2757	FELBAMATE	9000	9000	9000
KLO25-2758	FEMALE HORMONAL PANEL	43000	43000	43000
KLO25-2759	FERRIC CHLORIDE TEST, URINE	340	340	340
KLO25-2760	FERRIC CHLORIDE TEST, URINE.(L)	130	130	130
KLO25-2761	FETAL INFECTION SCREEN-PCR	7000	7000	7000
KLO25-2762	FEVER PANEL MULTIPLEX, PCR	5500	5500	5500
KLO25-2763	FGF 23	2900	2900	2900
KLO25-2764	FIB-4 INDEX	400	400	400
KLO25-2765	FIBRINOGEN	1200	1200	1200
KLO25-2766	FIBRINOGEN LEVEL FACTOR I CITRATED PLASMA	1100	1100	1100
KLO25-2767	FIBRINOGENCLOTTING ACTIVITY	1080	1080	1080
KLO25-2768	FIBROBLAST GROWTH FACTOR (FGF2)	20700	20700	20700
KLO25-2769	FIBROBLAST GROWTH FACTOR 23 (FGR 23)	33900	33900	33900
KLO25-2770	FIBROBLAST GROWTH FACTOR 23; FGF 23	9270	9270	9270
KLO25-2771	FIBROMAX, SERUM	13650	13650	13650

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2772	FIBROMETER TEST	4000	4000	4000
KLO25-2773	FIBROMETER TEST (NAFLD)	4725	4725	4725
KLO25-2774	FIBROMYALGIA PANEL	5600	5600	5600
KLO25-2775	FILARIA IgG/IgM ANTIBODIES	1370	1370	1370
KLO25-2776	FILARIA (WUCHERERIA BANCROFTI) ANTIGEN, BLOOD	900	900	900
KLO25-2777	FILARIA ANTIBODY, SERUM	1250	1250	1250
KLO25-2778	FILARIA ANTIGEN	1250	1250	1250
KLO25-2779	FILARIA IGG4 ANTIBODY, ELISA	2890	2890	2890
KLO25-2780	FIP1L1-PGDFRA GENE REARRANGEMENT DETECTION	7800	7800	7800
KLO25-2781	FIRST TRIMESTER ENHANCED	3500	3500	3500
KLO25-2782	FIRST TRIMESTER QUAD	3500	3500	3500
KLO25-2783	FIRST TRIMESTER QUAD & PREECLAMPSIA RISK ASSESSMENT	5000	5000	5000
KLO25-2784	FIRST TRIMESTER TRIPLE	3500	3500	3500
KLO25-2785	FIRST TRIMESTER TRIPLE & PREECLAMPSIA RISK ASSESSMENT	4800	4800	4800
KLO25-2786	FISH - AGGRESSIVE LYMPHOMA PANEL	14000	14000	14000
KLO25-2787	FISH - BCL6 (3q27) GENE REARRANGEMENT	6500	6500	6500
KLO25-2788	FISH - SYNOVIAL SARCOMA (SS18 / SYT) 18q11.2 GENE REARRANGEMENT	9300	9300	9300
KLO25-2789	FISH & CHROMOSOME 21 & KARYOTYPING	10600	10600	10600
KLO25-2790	FISH & KARYOTYPING FOR 22Q MICRODELETION-AMNIOTIC FLUID	9000	9000	9000
KLO25-2791	FISH & KARYOTYPING FOR 22Q MICRODELETION-FETAL BLOOD	9000	9000	9000
KLO25-2792	FISH & KARYOTYPING FOR 22Q MICRODELETION-VENOUS BLOOD	5500	5500	5500
KLO25-2793	FISH & KARYOTYPING FOR ANEUPLOIDY SCREEN (13, 18, 21, X, Y PROBES) ON POST NATAL CORD BLOOD	9000	9000	9000
KLO25-2794	FISH & KARYOTYPING FOR MILLER DIEKER SYNDROME	6800	6800	6800
KLO25-2795	FISH & KARYOTYPING FOR MILLER DIEKER SYNDROME-AMNIOTIC FLUID	7000	7000	7000
KLO25-2796	FISH & KARYOTYPING FOR PRADER WILLI/ANGELMAN SYNDROME-AMNIOTIC FLUID	7000	7000	7000
KLO25-2797	FISH & KARYOTYPING FOR PRADER WILLI/ANGELMAN SYNDROME-CVS	7000	7000	7000
KLO25-2798	FISH & KARYOTYPING FOR PRADER WILLI/ANGELMAN SYNDROME-FETAL BLOOD	7000	7000	7000
KLO25-2799	FISH & KARYOTYPING FOR PRADER WILLI/ANGELMAN SYNDROME-VENOUS BLOOD	7000	7000	7000
KLO25-2800	FISH (5 PROBES)- AMNIOTIC FLUID (L)	6500	6500	6500
KLO25-2801	FISH (5 PROBES)- CVS (L)	6500	6500	6500
KLO25-2802	FISH (L)	6500	6500	6500
KLO25-2803	FISH (SINGLE PROBE)- AMNIOTIC FLUID (L)	3000	3000	3000
KLO25-2804	FISH (SINGLE PROBE)- CVS (L)	3000	3000	3000
KLO25-2805	FISH + CMA (315 K) (L)	15000	15000	15000
KLO25-2806	FISH + CMA (750 K) (L)	19000	19000	19000
KLO25-2807	FISH + CYTOPRIME MICROARRAY (G)	19500	19500	19500
KLO25-2808	FISH + CYTOSURE MICROARRAY (G)	31200	31200	31200
KLO25-2809	FISH + KARYOTYPING (PRENATAL) (G)	12000	12000	12000
KLO25-2810	FISH + KT (BS)	10000	10000	10000
KLO25-2811	FISH + KT (L)	12500	12500	12500
KLO25-2812	FISH + MCC + CMA (315 K) (BS)	13500	13500	13500
KLO25-2813	FISH + MCC + CMA (750 K) (BS)	19000	19000	19000
KLO25-2814	FISH 5 PROBE + MICROARRAY HIGH RESOLUTION (LI)	22000	22000	22000
KLO25-2815	FISH 5 PROBE + MICROARRAY LOW RESOLUTION (LI)	18000	18000	18000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2816	FISH FOR 1P19Q CODELETION (M)	10000	10000	10000
KLO25-2817	FISH FOR ANEUPLOIDY SCREEN (13,18,21, X, Y PROBES)	7000	7000	7000
KLO25-2818	FISH FOR ANEUPLOIDY SCREEN (13,18,21, X, Y PROBES) KARYOTYPING	13000	13000	13000
KLO25-2819	FISH FOR BCR/ABL (9;22) FUSION (M)	4200	4200	4200
KLO25-2820	FISH FOR CHROMOSOME 13 AND KARYOTYPING ON AMNIOTIC FLUID	11100	11100	11100
KLO25-2821	FISH FOR CHROMOSOME 13 ON AMNIOTIC FLUID	4400	4400	4400
KLO25-2822	FISH FOR CHROMOSOME 13 ON CHRONIC VILLI	4200	4200	4200
KLO25-2823	FISH FOR CHROMOSOME 13 ON FETAL BLOOD	3800	3800	3800
KLO25-2824	FISH FOR CHROMOSOME 13 ON POST NATAL CORD BLOOD	3800	3800	3800
KLO25-2825	FISH FOR CHROMOSOME 13 ON PRODUCTS OF CONCEPTION	3900	3900	3900
KLO25-2826	FISH FOR CHROMOSOME 13 ON VENOUS BLOOD	3800	3800	3800
KLO25-2827	FISH FOR CHROMOSOME 18 ON AMNIOTIC FLUID	4400	4400	4400
KLO25-2828	FISH FOR CHROMOSOME 18 ON CHRONIC VILLI	4200	4200	4200
KLO25-2829	FISH FOR CHROMOSOME 18 ON FETAL BLOOD	3800	3800	3800
KLO25-2830	FISH FOR CHROMOSOME 18 ON POST NATAL CORD BLOOD	3800	3800	3800
KLO25-2831	FISH FOR CHROMOSOME 18 ON PRODUCTS OF CONCEPTION	3900	3900	3900
KLO25-2832	FISH FOR CHROMOSOME 18 ON VENOUS BLOOD	3800	3800	3800
KLO25-2833	FISH FOR CHROMOSOME 21	3700	3700	3700
KLO25-2834	FISH FOR CHROMOSOME 21-AMNIOTIC FLUID	4400	4400	4400
KLO25-2835	FISH FOR CHROMOSOMES 13, 18, 21, X & Y (G)	6500	6500	6500
KLO25-2836	FISH FOR DELETION 20Q (M)	4200	4200	4200
KLO25-2837	FISH FOR DELETION 5Q (ALSO KNOWN AS EGR1) (M)	4200	4200	4200
KLO25-2838	FISH FOR DELETION 7Q (M)	4200	4200	4200
KLO25-2839	FISH FOR DI-GEORGE SYNDROME (G)	4700	4700	4700
KLO25-2840	FISH FOR INV 3 (M)	4200	4200	4200
KLO25-2841	FISH FOR MDS (5 MARKERS) (M)	10000	10000	10000
KLO25-2842	FISH FOR MDS (ANY 3 MARKERS) (M)	8000	8000	8000
KLO25-2843	FISH FOR MLL AMPLIFICATION (ALSO KNOWN AS 11Q23) (M)	4200	4200	4200
KLO25-2844	FISH FOR SEX CHROMOSOMES(X, Y PROBES) AND KARYOTYPING ON AMNIOTIC FLUID	11100	11100	11100
KLO25-2845	FISH FOR TRISOMY 8 (M)	4200	4200	4200
KLO25-2846	FISH FOR X Y PROBES-AMNIOTIC FLUID	4400	4400	4400
KLO25-2847	FISH FOR X Y PROBES-FETAL BLOOD	4400	4400	4400
KLO25-2848	FISH FOR X Y PROBES-VENOUS BLOOD	4000	4000	4000
KLO25-2849	FISH -NON SMALL CELL LUNG CARCINOMA WITH ALK1 AND ROS1	13000	13000	13000
KLO25-2850	FISH PANEL + KARYOTYPING) (BS)	33600	33600	33600
KLO25-2851	FISH TEST - FOLLICULAR LYMPHOMA (IGH/BCL2) T (14;18)	6500	6500	6500
KLO25-2852	FISH TEST - HER2 ERBB2) AMPLIFICATION	11000	11000	11000
KLO25-2853	FISH TEST - MYCN AMPLIFICATION	8700	8700	8700
KLO25-2854	FISH TEST - PRENATAL SCREENING PANEL	13000	13000	13000
KLO25-2855	FISH TEST -14Q 32.3 OR LSI IGH -BONE MARROW	6000	6000	6000
KLO25-2856	FISH TEST -15Q9-13 MICRODELETION (PRADER-WILLI/ANGELMAN SYNDROME), BLOOD	6100	6100	6100
KLO25-2857	FISH TEST -17P	5000	5000	5000
KLO25-2858	FISH TEST -17P DEL BONE MARROW	5700	5700	5700
KLO25-2859	FISH TEST -20Q DEL, BLOOD-	5700	5700	5700

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2860	FISH TEST -20Q DEL, BONE MARROW	5700	5700	5700
KLO25-2861	FISH TEST -5Q DEL (MDS)-BLOOD	5700	5700	5700
KLO25-2862	FISH TEST -5Q DEL -BONE MARROW	5700	5700	5700
KLO25-2863	FISH TEST -6Q DEL-BLOOD	7000	7000	7000
KLO25-2864	FISH TEST -6Q DEL-BONE MARROW	5700	5700	5700
KLO25-2865	FISH TEST -7Q DEL-BLOOD	5700	5700	5700
KLO25-2866	FISH TEST -7Q DEL-BONE MARROW	5700	5700	5700
KLO25-2867	FISH TEST -7Q9.23 MICRODELETION (WILLIAMS SYNDROME)	5700	5700	5700
KLO25-2868	FISH TEST -8Q DEL-BLOOD	5700	5700	5700
KLO25-2869	FISH TEST -8Q DEL-BONE MARROW	5700	5700	5700
KLO25-2870	FISH TEST -9Q DEL-BLOOD	5700	5700	5700
KLO25-2871	FISH TEST -9Q DEL-BONE MARROW	4500	4500	4500
KLO25-2872	FISH TEST -9Q23 DEL-BLOOD	5700	5700	5700
KLO25-2873	FISH TEST -9Q23 DEL-BONE MARROW	5700	5700	5700
KLO25-2874	FISH TEST -ALCL,ALK,2P23 REARRANGEMENT	24900	24900	24900
KLO25-2875	FISH TEST -ALL, TCF3/PBX1,T(1:19)(Q23.3:P13.3)	24990	24990	24990
KLO25-2876	FISH TEST -AMNIOTIC FLUID- CHROMOSOME 13,18,21,X,Y	7750	7750	7750
KLO25-2877	FISH TEST -B-CELL CHRONIC LYMPHOCITIC LEUKEMIA	22000	22000	22000
KLO25-2878	FISH TEST -BCR-ABL -BONE MARROW	4300	4300	4300
KLO25-2879	FISH TEST -BLOOD-CHROMOSOME 13,18,21 X,Y	9000	9000	9000
KLO25-2880	FISH TEST -BURKITTS/NHL/ALL,IGH/MYC,T(8:14)	21200	21200	21200
KLO25-2881	FISH TEST -CHORIONIC VILLUS-CHROMOSOME 13,18,21,X,Y	9000	9000	9000
KLO25-2882	FISH TEST -CHROMOSOME 21, BLOOD	4500	4500	4500
KLO25-2883	FISH TEST -CHROMOSOME 21, CHORIONIC VILLUS	4500	4500	4500
KLO25-2884	FISH TEST -CHROMOSOME 21, POC	4500	4500	4500
KLO25-2885	FISH TEST -DEL 13Q OR LSI D 13S319 -BONE MARROW	4500	4500	4500
KLO25-2886	FISH TEST -E2A (ALL) BY FISH, BONE	4500	4500	4500
KLO25-2887	FISH TEST -E2A (ALL) BY FISH, BLOOD, BONE	4500	4500	4500
KLO25-2888	FISH TEST- EOSINOPHILIC LEUKEMIA PANEL	13500	13500	13500
KLO25-2889	FISH TEST -ETO/AMLI (T (8;21) TRANSLOCATION), BONE MARROW	5600	5600	5600
KLO25-2890	FISH TEST -EWING/PNET,EWSR1,22Q12 REARRANGEMENTS	19530	19530	19530
KLO25-2891	FISH TEST -FANCONI'S ANEMIA	7400	7400	7400
KLO25-2892	FISH TEST- FGFR1 (8P12) GENE REARRANGEMENT	4200	4200	4200
KLO25-2893	FISH TEST -FOLLICULAR LYMPHOMA,BCL-2/JH T(14:18),RT PCR, PLASMA BASED LEUMETA	19660	19660	19660
KLO25-2894	FISH TEST -IGH/CCNDI-T (9:14) TRANSLOCATION, BLOOD	4300	4300	4300
KLO25-2895	FISH TEST -INV (16) OR LSI CBFB- BONE MARROW	4300	4300	4300
KLO25-2896	FISH TEST -KARYOTYPING + FISH FOR ANEUPLOIDY (13,18,21,X,Y)	20000	20000	20000
KLO25-2897	FISH TEST -MULTIPLE MYELOMA	16200	16200	16200
KLO25-2898	FISH TEST -MULTIPLE MYELOMA WITH CD138	15000	15000	15000
KLO25-2899	FISH TEST -N-MYC AMPLIFICATION, NEUROBLASTOMA	18020	18020	18020
KLO25-2900	FISH TEST -OLIGODERODROGLIMA, 1P/19Q	23690	23690	23690
KLO25-2901	FISH TEST ON BLOOD/ MARROW - CLL PANEL-DLEU(13q14), P53(17p13), ATM(11q22), GLI(12q13), 6q21 & C-myc (8q24)	9300	9300	9300
KLO25-2902	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - 11q23 or LSIL MLL GENE BREAKAPART	4300	4300	4300

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2903	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - 14q32.3 or LSI IGM GENE BREAKAPART	4300	4300	4300
KLO25-2904	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - 22q DELETION or LSI Di George/VCFS	5600	5600	5600
KLO25-2905	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - BCR/ABL OR PHILADELPHIA TRANSLOCATION	4400	4400	4400
KLO25-2906	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - BMT SEX MISMATCH, XY PROBE	4600	4600	4600
KLO25-2907	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - del 13q or LSI D 13S319	4300	4300	4300
KLO25-2908	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - inv (16) or LSI CBFB	4300	4300	4300
KLO25-2909	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - MDS PANEL - CHROMOSOMES 5q,7q,8q & 20q	8900	8900	8900
KLO25-2910	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - PRADER - VILLI SYNDROME (SNRPN)	6900	6900	6900
KLO25-2911	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - t (11;14) or LSI IGH/CCNDI	4600	4600	4600
KLO25-2912	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - t (12;21) or LSI TEL / AMLI	4600	4600	4600
KLO25-2913	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - t (15,17) or LSI PML/RARA	4600	4600	4600
KLO25-2914	FISH TEST ON PERIPHERAL BLOOD / BONE MARROW - t (8;21) or LSI ETO/AMLI	4600	4600	4600
KLO25-2915	FISH TEST- OPPOSITE SEX BMT (XX / XY	4600	4600	4600
KLO25-2916	FISH TEST -POC, CHROMOSOME 13,18,21,X,Y	6300	6300	6300
KLO25-2917	FISH TEST -SRY	6300	6300	6300
KLO25-2918	FISH TEST -T(1;19)(Q23;P13.3);TCF3-PBX1(E2A-PBX1), PCR	3500	3500	3500
KLO25-2919	FISH TEST -T(11;19)(Q23;P13.3),(MLL-ENL), PCR	3500	3500	3500
KLO25-2920	FISH TEST -T(12;21)(P13;Q22);ETV6-RUNX1(TEL-AML1), PCR	3500	3500	3500
KLO25-2921	FISH TEST -T(4;11)(Q21;Q23),(MLL-AF4), PCR	3500	3500	3500
KLO25-2922	FISH TEST -T(9;11)(P21-22;Q23);(MLL-AF9), PCR	3500	3500	3500
KLO25-2923	FISH TESTS ON AMNIOTIC FLUID - AMINO ONE PROBE	3500	3500	3500
KLO25-2924	FISH TESTS ON AMNIOTIC FLUID - AMINO THREE PROBES	7500	7500	7500
KLO25-2925	FISH TESTS ON AMNIOTIC FLUID - AMINO TWO PROBES	5500	5500	5500
KLO25-2926	FISH TESTS ON PARAFFIN BLOCK - BREAST CANCER Her-2/neu ONCOGENE AMPLIFICATION	12000	12000	12000
KLO25-2927	FISH TESTS ON PARAFFIN BLOCK - ONCOLOGY 1p & 19q CO DELETION	9000	9000	9000
KLO25-2928	FISH TESTS ON PARAFFIN BLOCK - ONCOLOGY EGFR GENE AMPLIFICATION	8600	8600	8600
KLO25-2929	FISH TESTS ON URINE - BLADDER CANCER RECURRENCE, CHROMOSOMES 3,7,17 AND p16 GENE ON CHROMOSOMES 9	8600	8600	8600
KLO25-2930	FISH-ACUTE LYMPHOBLASTIC LEUKEMIA (ALL) EXTENDED PANEL: HYPODIPLOIDY/HYPERDIPLOIDY	18700	18700	18700
KLO25-2931	FISH-MDM2 (12q15) GENE AMPLIFICATION	9300	9300	9300
KLO25-2932	FISH-MONOSOMY 7 / DELETION 7q31 FOR AML/MDS	4000	4000	4000
KLO25-2933	FISH-NTRK 1,2 & 3 GENE PANEL	16200	16200	16200
KLO25-2934	FISH-PDGFR alpha (4q12) GENE REARRANGEMENT	4500	4500	4500
KLO25-2935	FISH-PDGFR beta (5q33) GENE REARRANGEMENT	4500	4500	4500
KLO25-2936	FISH-POSTNATAL GENDER CONFIRMATION FOR AMBIGUOUS GENITALIA & SEX REVERSAL DISORDERS	4300	4300	4300
KLO25-2937	FISH-RARA VARIANT TRANSLOCATION	4300	4300	4300
KLO25-2938	FISH-RET GENE (10q11.2) REARRANGEMENT ASSAY	8600	8600	8600
KLO25-2939	FIST TEST - EQUIVOCAL HER2 (ERBB2)	11000	11000	11000
KLO25-2940	FIST TEST - MET (7Q31) AMPLIFICATION	7000	7000	7000
KLO25-2941	FIST TEST - ROS1 (6Q22) REARRANGEMENT	6500	6500	6500
KLO25-2942	FIST TEST -SRYGENE	7000	7000	7000
KLO25-2943	FKHR/PAX 3 TRANSLOCATION (1:13)	14850	14850	14850
KLO25-2944	FKHR/PAX 3 TRANSLOCATION (2:13)	14850	14850	14850
KLO25-2945	FLECAINIDE (TAMBOCOR)	5010	5010	5010

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2946	FLORESCENT TREPONEMAL AB (FTA-ABS)	2000	2000	2000
KLO25-2947	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 10	2200	2200	2200
KLO25-2948	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 103	2200	2200	2200
KLO25-2949	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 117	2200	2200	2200
KLO25-2950	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 11C	2200	2200	2200
KLO25-2951	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 13	2300	2300	2300
KLO25-2952	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 14	2200	2200	2200
KLO25-2953	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 15	2200	2200	2200
KLO25-2954	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 19	2200	2200	2200
KLO25-2955	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 2	2200	2200	2200
KLO25-2956	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 20	2200	2200	2200
KLO25-2957	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 22	2200	2200	2200
KLO25-2958	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 23	2200	2200	2200
KLO25-2959	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 25	2200	2200	2200
KLO25-2960	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 3	2200	2200	2200
KLO25-2961	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 30	2200	2200	2200
KLO25-2962	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 33	2200	2200	2200
KLO25-2963	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 34	2500	2500	2500
KLO25-2964	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 36	2200	2200	2200
KLO25-2965	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 38	2200	2200	2200
KLO25-2966	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 4	1800	1800	1800
KLO25-2967	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 41 (A).	2200	2200	2200
KLO25-2968	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 42 (a)	2300	2300	2300
KLO25-2969	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 45	2200	2200	2200
KLO25-2970	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 5	2200	2200	2200
KLO25-2971	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 55 & 59	6800	6800	6800
KLO25-2972	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 61	2200	2200	2200
KLO25-2973	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 64	2200	2200	2200
KLO25-2974	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 7	2300	2300	2300
KLO25-2975	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 79 a	2200	2200	2200
KLO25-2976	FLOW CYTOMETRY INDIVIDUAL MARKER - CD 8	2600	2600	2600
KLO25-2977	FLOW CYTOMETRY INDIVIDUAL MARKER - CD MPO	2200	2200	2200
KLO25-2978	FLOW CYTOMETRY INDIVIDUAL MARKER - FMC 7	2200	2200	2200
KLO25-2979	FLOW CYTOMETRY INDIVIDUAL MARKER - GLYCOPHORIN	2200	2200	2200
KLO25-2980	FLOW CYTOMETRY INDIVIDUAL MARKER - TdT	2200	2200	2200
KLO25-2981	FLOW CYTOMETRY INDIVIDUAL MARKER -ANY ONE MARKER	2200	2200	2200
KLO25-2982	FLOW CYTOMETRY INDIVIDUAL MARKER -CD 138 (PLASMA CELL MARKER)	2200	2200	2200
KLO25-2983	FLOW CYTOMETRY INDIVIDUAL MARKER -CD 16 + 56 (NATURAL KILLER CELLS)	4200	4200	4200
KLO25-2984	FLOW CYTOMETRY INDIVIDUAL MARKER -CD 36 (MONOCYTIC, ERYTHROID, MEGAKARYOCYTIC MARKER)	2300	2300	2300
KLO25-2985	FLOW CYTOMETRY INDIVIDUAL MARKER -CD 41	2200	2200	2200
KLO25-2986	FLOW CYTOMETRY INDIVIDUAL MARKER -CD 64 (MONOCYTIC, INTERMEDIATE NEUTROPHIL PRECURSOR M	2300	2300	2300
KLO25-2987	FLOW CYTOMETRY INDIVIDUAL MARKER -CD 79B (B LYMPHOID CELL MARKER)	2200	2200	2200
KLO25-2988	FLOW CYTOMETRY INDIVIDUAL MARKER -CD123 (ERYTHROID, MONOCYTIC & MEGAKARYOCYTIC MARKE	2200	2200	2200
KLO25-2989	FLOW CYTOMETRY INDIVIDUAL MARKER -DNA PLOIDY, TISSUE	5000	5000	5000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-2990	FLOW CYTOMETRY INDIVIDUAL MARKER -HLA DR (ACTIVATION MARKER)	2050	2050	2050
KLO25-2991	FLOW CYTOMETRY INDIVIDUAL MARKER -ZAP - 70 (MARKER FOR CLL)	2200	2200	2200
KLO25-2992	FLOW CYTOMETRY INDIVIDUAL MARKER-IgA HEAVY CHAIN CYTOPLASMIC	2300	2300	2300
KLO25-2993	FLOW CYTOMETRY INDIVIDUAL MARKER-IgA HEAVY CHAIN SURFACE	3000	3000	3000
KLO25-2994	FLOW CYTOMETRY INDIVIDUAL MARKER-IgD HEAVY CHAIN CYTOPLASMIC	2300	2300	2300
KLO25-2995	FLOW CYTOMETRY INDIVIDUAL MARKER-IgD HEAVY CHAIN SURFACE	3000	3000	3000
KLO25-2996	FLOW CYTOMETRY INDIVIDUAL MARKER-IgG HEAVY CHAIN CYTOPLASMIC	2200	2200	2200
KLO25-2997	FLOW CYTOMETRY INDIVIDUAL MARKER-IgG HEAVY CHAIN SURFACE	2200	2200	2200
KLO25-2998	FLOW CYTOMETRY INDIVIDUAL MARKER-IgM HEAVY CHAIN CYTOPLASMIC	2200	2200	2200
KLO25-2999	FLOW CYTOMETRY INDIVIDUAL MARKER-IgM HEAVY CHAIN SURFACE	2200	2200	2200
KLO25-3000	FLOW CYTOMETRY INDIVIDUAL MARKER-KAPPA & LAMBDA LIGHT CHAIN	4200	4200	4200
KLO25-3001	FLOW CYTOMETRY ZAP -70	2200	2200	2200
KLO25-3002	FLOW CYTOMETRY, CD 19	2200	2200	2200
KLO25-3003	FLOW CYTOMETRY, CD 1A	2200	2200	2200
KLO25-3004	FLOW CYTOMETRY, CD 20	2200	2200	2200
KLO25-3005	FLOW CYTOMETRY, CD 22	2200	2200	2200
KLO25-3006	FLOW CYTOMETRY, CD 23	2200	2200	2200
KLO25-3007	FLOW CYTOMETRY, CD 25	2200	2200	2200
KLO25-3008	FLOW CYTOMETRY, CD 33	2200	2200	2200
KLO25-3009	FLOWCYTOMETERY PANEL - B-CELL DISEASE	7280	7280	7280
KLO25-3010	FLOWCYTOMETERY PANEL - T-ALL	7280	7280	7280
KLO25-3011	FLOWCYTOMETERY PANEL - T-CELL DISEASE	5600	5600	5600
KLO25-3012	FLOWCYTOMETERY, PLASMA CELL NEOPLASIA PANEL	10000	10000	10000
KLO25-3013	FLOWCYTOMETRY PANEL MRD- ACUTE MYELOID LEUKEMIA (AML)	14000	14000	14000
KLO25-3014	FLOWCYTOMETRY, COMPREHENSIVE PANEL	13200	13200	13200
KLO25-3015	FLOWCYTOMETRY, LYMPHOCYTOSIS	12980	12980	12980
KLO25-3016	FLT3 (ITD, D835Y) (BS)	4800	4800	4800
KLO25-3017	FLT3 GENE INTERNAL TANDEM DUPLICATION (FLT3-ITD) ANALYSIS AND D835 POINT MUTATION ANALYSIS (	7500	7500	7500
KLO25-3018	FLT3 MUTATION STUDY	3500	3500	3500
KLO25-3019	FLT-3, BLOOD-PCR	6100	6100	6100
KLO25-3020	FLT-3, BONE MARROW, PCR	6100	6100	6100
KLO25-3021	FLUID EXAMINATION, ROUTINE, BODY FLUIDS	500	500	500
KLO25-3022	FLUOXETINE	11000	11000	11000
KLO25-3023	FOLATE RBC	2380	2380	2380
KLO25-3024	FOOD ANALYSIS BACTERIOLOGICAL FOOD	3510	3510	3510
KLO25-3025	FOOD DETECT	6000	6000	6000
KLO25-3026	FOOD INTOLERANCE TEST	14000	14000	14000
KLO25-3027	FOUNDATION ONE HEME	330000	330000	330000
KLO25-3028	FOUNDATIONONE CDX (F1CDX	270000	270000	270000
KLO25-3029	FOUNDATIONONE LIQUIDCDX (F1LCD	270000	270000	270000
KLO25-3030	FRACTIONAL EXCRETION OF SODIUM	800	800	800
KLO25-3031	FRAGILE X (FMR1) MUTATION SCREEN	8100	8100	8100
KLO25-3032	FRAGILE X CHROMOSOMAL ANALYSIS, BLOOD -PCR	8100	8100	8100
KLO25-3033	Fragile X on CVS/amnio	12000	12000	12000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3034	FRAGILE X SYNDROME (BS)	4800	4800	4800
KLO25-3035	FRAGILE X TREMOR/ATAXIA SYNDROME; (FXTAS)	5900	5900	5900
KLO25-3036	FRAGILE X. (L)	7000	7000	7000
KLO25-3037	Fragile-X for Females	10000	10000	10000
KLO25-3038	FRAGILE-X KARYOTYPING (BS)	6240	6240	6240
KLO25-3039	FRAGILE-X KARYOTYPING (POSTNATAL) (G)	8100	8100	8100
KLO25-3040	FRAGILE-X KARYOTYPING (PRENATAL) (G)	9300	9300	9300
KLO25-3041	Fragile-X Screening- Prenatal Sample	10000	10000	10000
KLO25-3042	FRASER SYNDROME GENES (M)	17000	17000	17000
KLO25-3043	FREE ANDROGEN INDEX (FAI), SERUM	2750	2750	2750
KLO25-3044	FREE KAPPA FREELITE CHAINS	3500	3500	3500
KLO25-3045	FREE LAMBDA FREELITE CHAINS	3300	3300	3300
KLO25-3046	FREE PROTEIN S	6500	6500	6500
KLO25-3047	FRIEDREICH ATAXIA	7410	7410	7410
KLO25-3048	Friedreich ataxia - Triplet repeat PCR	10000	10000	10000
KLO25-3049	FRUCTOSAMINE	520	520	520
KLO25-3050	FRUCTOSAMINE. (M)	650	650	650
KLO25-3051	FUCOSIDOSIS - LYSOSOMAL STORAGE DISORDER - FUCA1 GENE ANALYSIS (M)	25000	25000	25000
KLO25-3052	FUNGAL PANEL	15980	15980	15980
KLO25-3053	FUNGAL SUSCEPTIBILITY MIC PANEL,9 DRUGS	4500	4500	4500
KLO25-3054	FUNGAL SUSCEPTIBILITY MIC SINGLE DRUG	2200	2200	2200
KLO25-3055	FUNGUS PANEL, CSF	13000	13000	13000
KLO25-3056	G1138C) (BS)	7200	7200	7200
KLO25-3057	G542X) (BS)	6000	6000	6000
KLO25-3058	G-6 PD, GENE MUTATION	5040	5040	5040
KLO25-3059	G-6-PD, NEWBORN SCREEN	250	250	250
KLO25-3060	GABAPENTIN, PLASMA	7500	7500	7500
KLO25-3061	GAD 65 ANTIBIODY PARANEOPLASTIC SYNDROME	7000	7000	7000
KLO25-3062	GALACTOMANNAN	5870	5870	5870
KLO25-3063	GALACTOSE - 1 PHOSPHATE, QUANTITATIVE	1700	1700	1700
KLO25-3064	GALACTOSE 6 SULPHATE SULPHATASE	7000	7000	7000
KLO25-3065	GALACTOSE, PLASMA	2310	2310	2310
KLO25-3066	GALACTOSEMIA - GALT GENE ANALYSIS (M)	20000	20000	20000
KLO25-3067	GALACTOSEMIA (EPIMERASE), QUANTITATIVE	2450	2450	2450
KLO25-3068	GALACTOSEMIA CLASSICAL, QUANTITATIVE	2350	2350	2350
KLO25-3069	GALACTOSEMIA GENE MUTATION	9520	9520	9520
KLO25-3070	GALACTOSEMIA NEONATAL, SCREEN	250	250	250
KLO25-3071	GALACTOSEMIA PANEL 1	2600	2600	2600
KLO25-3072	GALACTOSEMIA PANEL 2	3600	3600	3600
KLO25-3073	GALACTOSEMIA PANEL 3	3900	3900	3900
KLO25-3074	GALACTOSEMIA SCREEN, BLOOD	800	800	800
KLO25-3075	GALACTOSIALIDOSIS - LYSOSOMAL STORAGE DISORDER - CTSA GENE ANALYSIS (M)	25000	25000	25000
KLO25-3076	GALL STONE ANALYSIS	1050	1050	1050
KLO25-3077	GALL STONE ANALYSIS WITH PICTURE	1200	1200	1200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3078	GANCICLOVIR RESISTANCE DETECTION	7680	7680	7680
KLO25-3079	GANGIOSIDE ANTIBODY PROFILE -IgG	4800	4800	4800
KLO25-3080	GANGIOSIDE ANTIBODY PROFILE -IgM	4800	4800	4800
KLO25-3081	GANGLIOSIDE ANTIBODIES, IgG & IgM	19750	19750	19750
KLO25-3082	GANGLIOSIDE ASIALO - GM1 ANTIBODY	19570	19570	19570
KLO25-3083	GANGLIOSIDE GD 1 A IGM	7700	7700	7700
KLO25-3084	GANGLIOSIDE GD IB IGM ANTIBODY	6120	6120	6120
KLO25-3085	GANGLIOSIDE GD1A ANTIBODY, IGG	7700	7700	7700
KLO25-3086	GANGLIOSIDE GD1B ANTIBODY, IGG	7700	7700	7700
KLO25-3087	GANGLIOSIDE GQIB IgG ANTIBODIES	12090	12090	12090
KLO25-3088	Gardenella Vaginalis	1200	1200	1200
KLO25-3089	GARDNERELLA VAGINALIS CULTURE	1390	1390	1390
KLO25-3090	GASTRIC LAVAGE PH	200	200	200
KLO25-3091	GASTRIC PARIETAL CELL ANTIBODY, (GPCA), SERUM IFA	2150	2150	2150
KLO25-3092	GASTRIC/INTESTINAL CARCINOMA VS LYMPHOMA-IHC PANEL, TISSUE	5700	5700	5700
KLO25-3093	GASTRIN	1540	1540	1540
KLO25-3094	GASTRIN SECRETIN STIMULATION	8400	8400	8400
KLO25-3095	GASTROENTERITIS BACTERIAL PANEL, PCR	5250	5250	5250
KLO25-3096	GASTROENTERITIS VIRAL PANEL, PCR	5250	5250	5250
KLO25-3097	GASTROENTERITIS SCREENING PANEL	1450	1450	1450
KLO25-3098	GATA 3	2300	2300	2300
KLO25-3099	GAUCHER DISEASE QUANTITATIVE, BLOOD	2100	2100	2100
KLO25-3100	GCDFP-15	2700	2700	2700
KLO25-3101	GCV RESISTANCE TEST, PLASMA-PCR	6400	6400	6400
KLO25-3102	GENETIC MAPPING -CARDIOVASCULAR DISORDERS	17000	17000	17000
KLO25-3103	GENETIC MAPPING -GYNECOLOGICAL DISORDERS	17000	17000	17000
KLO25-3104	GENETIC MAPPING -ONCOLOGY/CANCER DISORDERS	18400	18400	18400
KLO25-3105	GENETIC MAPPING -WHOLE GENOME	32400	32400	32400
KLO25-3106	GENEXPERT MTB WITH RIFAMPICIN RESISTANCE , PCR & AFB CULTURE	2400	2400	2400
KLO25-3107	GENEXPERT REFLEX TESTING (4 DRUG SENSITIVITY)	6600	6600	6600
KLO25-3108	GENEXPERT. COM	2900	2900	2900
KLO25-3109	GENITAL MYCOPLASMA / UREAPLASMA CULTURE	1250	1250	1250
KLO25-3110	GENO-TB--DRT(GENOMIC TB DRUG R	7500	7500	7500
KLO25-3111	GENOTYPIC ASSAY – TB SECOND LINE DRUG	6500	6500	6500
KLO25-3112	GENTAMICIN (GARAMYCIN, GENTICYN, LYRAMYCIN)	7060	7060	7060
KLO25-3113	GERM CELL TUMOR PANEL	1900	1900	1900
KLO25-3114	GF-Acute Leukemia Mini Panel (AML/ETO, INV[16], PML/RARA, BCR/ABL, TEL/AML1, MLL,	14000	14000	14000
KLO25-3115	GF-Acute leukemia Panel	13800	13800	13800
KLO25-3116	GF-ALL FISH PANEL	13500	13500	13500
KLO25-3117	GF-ALL PANEL (Cytogenetics + FISH [BCR/ABL, TEL/AML1, MLL, E2A])	17000	17000	17000
KLO25-3118	GF-ALL PCR Panel (BCR/ABL,TEL/AML1,MLL, E2A]	7000	7000	7000
KLO25-3119	GF-AML FISH PANEL (FISH)	13500	13500	13500
KLO25-3120	GF-AML PANEL (Cytogenetics + FISH [AML/ETO, inv(16), PML/RARA, MLL])	17000	17000	17000
KLO25-3121	GF-AML PCR Panel (AML/ETO, inv(16), PML/RARA)	7000	7000	7000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3122	GF-AML PCR Panel (AML/ETO, inv(16), PML/RARA)+NPM1+FLT3+CEBPA	17000	17000	17000
KLO25-3123	GF-BCR-ABL (Qualitative)PCR	5200	5200	5200
KLO25-3124	GF-BCR-ABL (Quantitative)PCR	6500	6500	6500
KLO25-3125	GF-BRCA 1 & 2 Gene Panel NGS	20000	20000	20000
KLO25-3126	GF-Chronic Leukaemia Panel (CLPD)	13800	13800	13800
KLO25-3127	GF-Clinical Exome sequencing (CES) NGS	25000	25000	25000
KLO25-3128	GF-CLL FISH PANEL (FISH	10000	10000	10000
KLO25-3129	GF-CLL PANEL (Cytogenetics + FISH [del(11q), trisomy 12, del(13q), del(17p)])	13500	13500	13500
KLO25-3130	GF-C-Myc (ALL, NHL) FISH	6000	6000	6000
KLO25-3131	GF-Colorectal Cancer Panel [NRAS,KRAS,BRAF](PCR)	13800	13800	13800
KLO25-3132	GF-Cytogenetic hematological malignancy (Karyotyping)	3800	3800	3800
KLO25-3133	GF-Flowcytometry MRD	14800	14800	14800
KLO25-3134	GF-Flowcytometry PNH work up	7500	7500	7500
KLO25-3135	GF-JAK2 Gene (V617F) Quantitative PCR	22000	22000	22000
KLO25-3136	GF-Lung Cancer Panel 4 [EGFR,ALK1,ROS1,MET,PDL1] NGS	15000	15000	15000
KLO25-3137	GF-MDS FISH PANEL	9800	9800	9800
KLO25-3138	GF-MDS PANEL (Cytogenetics + FISH [del(5q), del(7q), del(20q)])	13500	13500	13500
KLO25-3139	GF-MM FISH PANEL (FISH [del(11q), del(13q), IgH,	14000	14000	14000
KLO25-3140	GF-Multiple Myeloma PANEL (Cytogenetics + FISH [del(11q), del(13q), IgH, del(17p)]	17500	17500	17500
KLO25-3141	GF-Oncomine Myeloid Panel [MDS,MPN,AML,CML,CMML,JMML] + FLT3 NGS	22000	22000	22000
KLO25-3142	GF-Oncomine Tumor mutation Burden (TMB)(NGS)	45000	45000	45000
KLO25-3143	GF-PML/RARA Quantitative PCR	6000	6000	6000
KLO25-3144	GF-PML/RARA(Qualitative)PCR	5600	5600	5600
KLO25-3145	GFR BTP-Beta Trace Protein	3000	3000	3000
KLO25-3146	GFR WITH CYSTATIN C	1200	1200	1200
KLO25-3147	GF-Solid tumor Combo1 [EGFR,ALK1,ROS1,MET,PDL1] NGS	15000	15000	15000
KLO25-3148	GF-Solid tumor Combo2 [MSI,NRAS,KRAS,BRAF,HRAS] NGS	15000	15000	15000
KLO25-3149	GF-Whole Exome sequencing (WES) 80-100x NGS	32000	32000	32000
KLO25-3150	GIARDIA & CRYPTOSPORIDUM PANEL, STOOL	4260	4260	4260
KLO25-3151	GIARDIA ANTIGEN DETECTION	1370	1370	1370
KLO25-3152	GILBERT OR CRIGLER-NAJJAR SYNDROME (UGT1A1) GENE ANALYSIS (BOTH POINT MUTATION AND REPE	16000	16000	16000
KLO25-3153	GIST (GASTROINTESTINAL STROMAL TUMOR) - THERANOSTIC PANEL (HOT SPOT) (M)	36000	36000	36000
KLO25-3154	GIST PDGFRA GENE MUTATION	11600	11600	11600
KLO25-3155	GLB1 (GM1 GANGLIOSIDOSIS; MUCOPOLYSACCHARIDOSIS TYPE IV) (M)	8000	8000	8000
KLO25-3156	GLIADIN ANTIBODIES , IGA	2380	2380	2380
KLO25-3157	GLIADIN ANTIBODIES PANEL, IGA & IGG	3800	3800	3800
KLO25-3158	GLIADIN ANTIBODIES,IGG	2170	2170	2170
KLO25-3159	GLIADIN DEAMIDATED ANTIBODIES PANEL, IGA & IGG	3600	3600	3600
KLO25-3160	GLIOMA PROGNOSTIC PANEL	17300	17300	17300
KLO25-3161	GLUCAGON	7750	7750	7750
KLO25-3162	GLUCOSAMINE N-ACETYL TRANSFERASE	8030	8030	8030
KLO25-3163	GLUCOSE TOLERANCE TEST, EXTENDED WITH INSULIN	7500	7500	7500
KLO25-3164	GLUT1 DEFICIENCY (SLC2A1) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-3165	GLUT1 DEFICIENCY (SLC2A1) GENE ANALYSIS (M)	17000	17000	17000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3166	GLUTAMIC ACID DECARBOXYLASE - 65 AUTOANTIBODIES	6700	6700	6700
KLO25-3167	GLUTAMIC ACID, SCREEN, SERUM	6950	6950	6950
KLO25-3168	GLUTAMIC ACID, SCREEN, URINE	6950	6950	6950
KLO25-3169	GLUTAMINE SCREEN, SERUM	6950	6950	6950
KLO25-3170	GLUTAMINE SCREEN, URINE	6950	6950	6950
KLO25-3171	GLUTATHIONE-S TRANSFERASE MUTATION DETECTION	22000	22000	22000
KLO25-3172	GLYCEMARK	500	500	500
KLO25-3173	GLYCINE ENCEPHALOPATHY (GLDC) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-3174	GLYCINE ENCEPHALOPATHY GENE PANEL (M)	22040	22040	22040
KLO25-3175	GLYCINE SCREEN, CSF	7000	7000	7000
KLO25-3176	GLYCINE SCREEN, SERUM	7000	7000	7000
KLO25-3177	GLYCINE SCREEN, URINE	7150	7150	7150
KLO25-3178	GLYCOASPARGINASE	5610	5610	5610
KLO25-3179	GLYCOGEN STORAGE DISORDER GENE PANEL (BS)	42000	42000	42000
KLO25-3180	GLYCOGEN STORAGE DISORDER GENE PANEL (M)	25000	25000	25000
KLO25-3181	Glycophorin A	2530	2530	2530
KLO25-3182	Glycosaminoglycan (GAG)	2470	2470	2470
KLO25-3183	GLYCOSYLATION (CDG) DISORDERS GENE PANEL (M)	21200	21200	21200
KLO25-3184	GLYPICAN 3	2130	2130	2130
KLO25-3185	GM1 GANGLIOSIDOSIS, QUANTITATIVE, BLOOD	1900	1900	1900
KLO25-3186	GM2 GANGLIOSIDOSIS, QUANTITATIVE BLOOD	2600	2600	2600
KLO25-3187	GNRH (LHRH) STIMULATION TEST	3850	3850	3850
KLO25-3188	GOLD, SERUM	4520	4520	4520
KLO25-3189	GOLD, URINE	7470	7470	7470
KLO25-3190	GONADOTROPIN RELEASING HORMONE STIMULATION TEST FOR FSH & LH, GNRH STIMULATION TEST FOR FSH & LH	4000	4000	4000
KLO25-3191	GOODPASTURES SYNDROM PANEL (AGBM & ANCA PR3)	3390	3390	3390
KLO25-3192	GROUP A STREPTOCOCCAL ANTIGEN	5280	5280	5280
KLO25-3193	GROWTH DISORDER PANEL	7150	7150	7150
KLO25-3194	GROWTH HORMONE (GH, HGH, HUMAN GROWTH HORMONE)	870	870	870
KLO25-3195	GROWTH HORMONE (L-DOPA) STIMULATION TEST, SERUM	3330	3330	3330
KLO25-3196	GROWTH HORMONE ANTIBODY	16100	16100	16100
KLO25-3197	GROWTH HORMONE RELEASING HORMONE	29700	29700	29700
KLO25-3198	GROWTH HORMONE STIMULATION TEST	3200	3200	3200
KLO25-3199	GROWTH HORMONE SUPRESSION TEST	2850	2850	2850
KLO25-3200	GROWTH HORMONE, CLONIDINE STIMULATION TEST, SERUM	2250	2250	2250
KLO25-3201	GST (GLUTATHIONE S TRANSFERASE) MUTATION, BLOOD-PCR	18000	18000	18000
KLO25-3202	GUT IMMUNOLOGY	22100	22100	22100
KLO25-3203	GYNAECOLOGICAL CANCER PANEL (BS)	30000	30000	30000
KLO25-3204	H3N2 & INFLUENZA B QUALITATIVE, PCR	4500	4500	4500
KLO25-3205	HAEMOCHROMATOSIS 2 MUTATION IN HFE GENE	7800	7800	7800
KLO25-3206	HAEMOGLOBIN FREE URINE	380	380	380
KLO25-3207	HAEMOGLOBIN FREE URINE .(L)	210	210	210
KLO25-3208	HAEMOGLOBIN, FREE, PLASMA	1150	1150	1150

LAB MEDICINE

Test Code	Test Name	OPD/Economy	IPD Charges Semi Pvt	Pvt
KLO25-3209	HAEMOPHILIA (F8 & F9) GENE PANEL (M)	36000	36000	36000
KLO25-3210	HAEMOPHILIA (F8) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-3211	Haemophilia A - Inversions 1/22 + F8 Gene sequencing	30000	30000	30000
KLO25-3212	Haemophilia A - F8 Gene sequencing	20000	20000	20000
KLO25-3213	Haemophilia A - Inversions 1/22	10000	10000	10000
KLO25-3214	HAEMOPHILIA A & B GENE PANEL (BS)	42000	42000	42000
KLO25-3215	HAEMOPHILIA A (F8) GENE ANALYSIS - COMBO	25000	25000	25000
KLO25-3216	HAEMOPHILIA A (F8) GENE ANALYSIS (ANALYSIS OF THE F8 INVERSION IS NOT INCLUDED) (M)	30000	30000	30000
KLO25-3217	HAEMOPHILIA B (F9) GENE ANALYSIS (M)	30000	30000	30000
KLO25-3218	HAEMOPHILUS INFLUENZA B ANTIGEN, CSF	1300	1300	1300
KLO25-3219	HAEMOPHILUS INFLUENZA B ANTIGEN, SERUM	3520	3520	3520
KLO25-3220	HAEMOPHILUS INFLUENZA B ANTIGEN, URINE	1100	1100	1100
KLO25-3221	HAEMOSIDERIN, URINE	350	350	350
KLO25-3222	HAINS MYCOBACTERIUM TUBERCULOSIS FIRST & SECOND LINE DRUG RESISTANCE PROFILE	6500	6500	6500
KLO25-3223	HAINS MYCOBACTERIUM TUBERCULOSIS -FIRST LINE DRUG RESISTANCE	2000	2000	2000
KLO25-3224	HAINS NONTUBERCULOUS MYCOBAC	13500	13500	13500
KLO25-3225	HAIR FALL PANEL	5400	5400	5400
KLO25-3226	HALOPERIDOL (HALDOL)	8900	8900	8900
KLO25-3227	HAM TEST (ACIDIFIED SERUM LYSIS TEST)	1200	1200	1200
KLO25-3228	HAM/PNH SCRCENING TEST(SUCROSE LYSIS TEST)	1440	1440	1440
KLO25-3229	HANTA VIRUS-IGM ANTIBODIES,SERUM	2460	2460	2460
KLO25-3230	HAPTOGLOBIN	2280	2280	2280
KLO25-3231	HAPTOGLOBIN GENOTYPE, BLOOD, PCR	4090	4090	4090
KLO25-3232	HAV-RNA DETECTION, BLOOD, PCR	6100	6100	6100
KLO25-3233	HBB GENE SEQUENCING (BS)	3500	3500	3500
KLO25-3234	HBB GENE SEQUENCING (M)	10000	10000	10000
KLO25-3235	HbD IRAN MUTATION ANALYSIS	4140	4140	4140
KLO25-3236	HbD PUNJAB MUTAITON ANALYSIS	4300	4300	4300
KLO25-3237	HBDH ENZYMATIC	4000	4000	4000
KLO25-3238	HBDH, ALPHA - HYDROXYBUTRATE DEHYDROGENASE	250	250	250
KLO25-3239	HBE (HEMOGLOBIN E) SCREENING (BS)	4200	4200	4200
KLO25-3240	HBE MUTATION ANALYSIS	4300	4300	4300
KLO25-3241	HBSAG QUANTITATIVE (CMIA)	1500	1500	1500
KLO25-3242	HBV BASAL CORE PROMOTER MUTATION	6380	6380	6380
KLO25-3243	HBV DRUG RESISTANCE AND GENOTYPING	10800	10800	10800
KLO25-3244	HBV GENO DRUG RESISTANCE QUANTITATIVE PCR	16700	16700	16700
KLO25-3245	HBV- GENOTYPING, PCR	7500	7500	7500
KLO25-3246	HBV -MUTATION PANEL	9500	9500	9500
KLO25-3247	HBV-DNA DETECTION (QUALITATIVE), AMNIOTIC FLUID	4400	4400	4400
KLO25-3248	HBV-DNA DETECTION (QUALITATIVE), ASCITIC FLUID	4400	4400	4400
KLO25-3249	HBV-DNA DETECTION (QUALITATIVE), CSF	4400	4400	4400
KLO25-3250	HBV-DNA DETECTION (QUALITATIVE), LIVER TISSUE	4400	4400	4400
KLO25-3251	HBV-DNA DETECTION (QUALITATIVE), PLASMA	4750	4750	4750
KLO25-3252	HBV-DNA GENOTYPING, PLASMA-PCR	6750	6750	6750

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3253	HBV-DNA QUANTIFICATION (VIRAL LOAD), SERUM	7500	7500	7500
KLO25-3254	HBV-YMDD MUTATION DETECTION, PCR	6000	6000	6000
KLO25-3255	HCG BETA SUBUNIT, SPOT URINE	900	900	900
KLO25-3256	HCG, BETA, TOTAL, QUANTITATIVE, 24 HOUR URINE	650	650	650
KLO25-3257	HCG, BETA, TOTAL, QUANTITATIVE, RANDOM URINE	650	650	650
KLO25-3258	HCV GENOFIBRO	27360	27360	27360
KLO25-3259	HCV4 (HCV RNA Qualitative AND HCV Antibodies)	5500	5500	5500
KLO25-3260	HDL CHOLESTEROL SUBCLASSES *HDL-2 *HDL-3	6020	6020	6020
KLO25-3261	HDV-RNA PLASMA, PCR	9290	9290	9290
KLO25-3262	HE4 (HUMAN EPIDIDYMIS PROTEIN 4)	2690	2690	2690
KLO25-3263	HEART ENSURE PANEL	8600	8600	8600
KLO25-3264	HEART SCREEN	2630	2630	2630
KLO25-3265	HEAVY & TRACE METALS PROFILE-1	11000	11000	11000
KLO25-3266	HEAVY & TRACE METALS PROFILE-2	6600	6600	6600
KLO25-3267	HEAVY METAL PANEL, BLOOD (LEAD & ARSENIC)	5900	5900	5900
KLO25-3268	HELICOBACTER PYLORI ANTIBODIES PANEL IGA & IGG	3100	3100	3100
KLO25-3269	HELICOBACTER PYLORI ANTIGEN, RAPID STOOL TEST	1710	1710	1710
KLO25-3270	HELICOBACTER PYLORI IGA ANTIBODY	2170	2170	2170
KLO25-3271	HELICOBACTER PYLORI IGG ANTIBODY	2170	2170	2170
KLO25-3272	HELICOBACTER PYLORI WITH CLARI	5800	5800	5800
KLO25-3273	HELICOBACTER PYLORI, IGM	2170	2170	2170
KLO25-3274	HEMOCHROMATOSIS 2 MUTATION DETECTION	7280	7280	7280
KLO25-3275	HEMOCHROMATOSIS DETECTION, HFE GENOTYPING	6600	6600	6600
KLO25-3276	HEMOCHROMATOSIS GENE PANEL (M)	17000	17000	17000
KLO25-3277	HEMOGLOBIN E (GLU 26LYS) MUTATION ANALYSIS	4560	4560	4560
KLO25-3278	HEMOGLOBIN, FREE, URINE	210	210	210
KLO25-3279	HEMOGLOBINOPATHY NEWBORN SCREEN	800	800	800
KLO25-3280	HEMOLYTIC UREMIC SYNDROME - HUS (CFH, CFHR1 & CFHR3) DELETION DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-3281	HEMOPHAGOCYTIC LYMPHOHISTIOCYTOSIS (HLH- DEL/DUP)DELETION/DUPLICATION ANALYSIS (M)	8500	8500	8500
KLO25-3282	HEMOPHAGOCYTIC LYMPHOHISTIOCYTOSIS (HLH) GENE PANEL (M)	36000	36000	36000
KLO25-3283	HEMOPHILIA A CARRIER DETECTION *FACTOR VIII, VWF ANTIGEN, FACTOR VIII/VWF RATIO	11200	11200	11200
KLO25-3284	HEMOPHILIA A, HEMOPHILIA B AN	23800	23800	23800
KLO25-3285	HEMOPHILIA PANEL *APTT *FACTOR VIII *FACTOR IX	2800	2800	2800
KLO25-3286	HEPARAIN SULPHATE SULPHAMIDASE SANFILIPO	7800	7800	7800
KLO25-3287	HEPARIN INDUCED THROMBOCYTOPENIA (HIT), IGG; ANTI PLATELET FACTOR 4-HEPARIN (PF4-H), IGG QUA	12900	12900	12900
KLO25-3288	HEPARIN LOW MOLECULE (XA)	9300	9300	9300
KLO25-3289	HEPARIN, UNFRACTIONATED	9300	9300	9300
KLO25-3290	HEPARIN-INDUCED PLATELET ANTIBODY	3780	3780	3780
KLO25-3291	HEPARIN-INDUCED THROMBOCYTOPENIA PANEL	5500	5500	5500
KLO25-3292	HEPARIN-INDUCED THROMBOCYTOPENIA PANEL USA	12850	12850	12850
KLO25-3293	HEPATITIS A & B VIRUS EVALUATION	6500	6500	6500
KLO25-3294	HEPATITIS A ANTIBODY (ANTI-HAV) IGG	1210	1210	1210
KLO25-3295	HEPATITIS A DIAGNOSTIC PANEL	2200	2200	2200
KLO25-3296	HEPATITIS ACUTE DIAGNOSTIC PANEL	2500	2500	2500

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3297	HEPATITIS ACUTE VIRUS CONFIRMATION	6600	6600	6600
KLO25-3298	HEPATITIS ATYPICAL VIRUS CONFIRMATION *CMV IGM *HSV IGM *VARICELLA ZOSTER IGM *EBV (VCA), IG	3780	3780	3780
KLO25-3299	HEPATITIS B ANTIBODY, ANTI HBe ANTIBODY(HEPATITIS B)	1310	1310	1310
KLO25-3300	HEPATITIS B CHRONIC PANEL	1900	1900	1900
KLO25-3301	HEPATITIS B CORE (TOTAL) ANTIBODY, ANTI HBC TOTAL	1100	1100	1100
KLO25-3302	HEPATITIS B CORE IGM(ANTI HBC AB IGM)	1580	1580	1580
KLO25-3303	HEPATITIS B IMMUNITY SCREEN *ANTI-HBC TOTAL *ANTI-HBS *HBSAG	2500	2500	2500
KLO25-3304	HEPATITIS B INFANT FOLLOW UP PANEL B	1000	1000	1000
KLO25-3305	HEPATITIS B MONITORING PANEL	10600	10600	10600
KLO25-3306	HEPATITIS B SURFACE ANTIBODY, ANTI HEPATITIS B SURFACE(HBsAb)	1310	1310	1310
KLO25-3307	HEPATITIS B SURFACE ANTIGEN CONFIRMATION	1300	1300	1300
KLO25-3308	HEPATITIS B SURFACE ANTIGEN, QUANTITATIVE	1390	1390	1390
KLO25-3309	HEPATITIS B VIRAL (HBV DNA), QUANTITATIVE REAL TIME PCR, ULTRA	5000	5000	5000
KLO25-3310	HEPATITIS B VIRAL DNA PCR QUALITATIVE	4400	4400	4400
KLO25-3311	HEPATITIS B VIRAL DRUG RESISTANCE & GENOTYPING	10000	10000	10000
KLO25-3312	HEPATITIS B VIRAL PCR DNA,QUANTITATIVE BDNA	7500	7500	7500
KLO25-3313	HEPATITIS B VIRUS BASAL CORE PROMOTER MUTATION	4400	4400	4400
KLO25-3314	HEPATITIS BE ANTIGEN(HBE AG)	1670	1670	1670
KLO25-3315	HEPATITIS Be PANEL	1500	1500	1500
KLO25-3316	HEPATITIS Be VIRUS TOTAL ANTIBODIES	1050	1050	1050
KLO25-3317	HEPATITIS C ANTIBODIES	1500	1500	1500
KLO25-3318	HEPATITIS C ANTIBODY SUPLEMENTAL TESTING	13710	13710	13710
KLO25-3319	HEPATITIS C MONITORING PANEL	8600	8600	8600
KLO25-3320	HEPATITIS C VIRAL COMBO PCR & RNA GENOTYPING	15500	15500	15500
KLO25-3321	HEPATITIS C VIRAL RNA DETE. PCR QUALITATIVE	4300	4300	4300
KLO25-3322	Hepatitis C Viral RNA Genotype 1 NS5a Drug Resistance	68500	68500	68500
KLO25-3323	HEPATITIS C VIRAL RNA, GENOTYPE	4500	4500	4500
KLO25-3324	HEPATITIS C VIRUS -TOTAL ANTIBODY REFLEX HCV RNA QUALITATIVE	1500	1500	1500
KLO25-3325	HEPATITIS C VIRUS, IgM ANTIBODY	1820	1820	1820
KLO25-3326	HEPATITIS D VIRUS DETECTION, PCR	7150	7150	7150
KLO25-3327	HEPATITIS DELTA - TOTAL	2230	2230	2230
KLO25-3328	HEPATITIS DELTA ANTIBODY, HDV (ANTI DELTA)	5200	5200	5200
KLO25-3329	HEPATITIS DELTA ANTIBODY, HDV- IGM	2550	2550	2550
KLO25-3330	HEPATITIS DELTA VIRUS -IgG	2550	2550	2550
KLO25-3331	HEPATITIS E VIRUS DETECTION, PCR	5600	5600	5600
KLO25-3332	HEPATITIS E ANTIBODY (ANTI-HEV), IGG	1600	1600	1600
KLO25-3333	HEPATITIS E ANTIBODY (Anti-HEV), IGM	1800	1800	1800
KLO25-3334	HEPATITIS G VIRUS RNA DETECTION PCR	5410	5410	5410
KLO25-3335	HEPATITIS PANEL AUTOIMMUNE- AUTOIMMUNE HEPATITIS PANEL-1	5700	5700	5700
KLO25-3336	HEPATITIS PANEL AUTOIMMUNE- AUTOIMMUNE HEPATITIS PANEL-2	3600	3600	3600
KLO25-3337	HEPATITIS VIRAL , COMPREHENSIVE PANEL	11500	11500	11500
KLO25-3338	HEPATITS E VIRUS (HEV) DETECTION, QUANTITATIVE PCR	12000	12000	12000
KLO25-3339	HEPATOCELLULAR CARCINOMA (HCC) PANEL	4000	4000	4000
KLO25-3340	HEPCIDIN	3000	3000	3000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3341	HER 2 – GASTRIC TISSUE (M)	2000	2000	2000
KLO25-3342	HEREDITARY CANCER GENE PANEL	18720	18720	18720
KLO25-3343	HEREDITARY CANCER GENE PANEL - EXTENDED (M)	36000	36000	36000
KLO25-3344	HEREDITARY CANCER GENE PANEL - FOCUSSED (M)	30000	30000	30000
KLO25-3345	HEREDITARY CANCER GENE PANEL -EXTENDED	39600	39600	39600
KLO25-3346	HEREDITARY CANCER PANEL	71000	71000	71000
KLO25-3347	HEREDITARY CANCER PANEL NEXT	34000	34000	34000
KLO25-3348	HEREDITARY ELLIPTOCYTOSIS GENE PANEL (M)	36000	36000	36000
KLO25-3349	HEREDITARY EXTENDED PANEL	71000	71000	71000
KLO25-3350	HEREDITARY FRUCTOSE INTOLERANCE - ALDOB GENE SEQUENCING (M)	20000	20000	20000
KLO25-3351	HEREDITARY HEMOCHROMATOSIS DNA MUTATION ANALYSIS	2850	2850	2850
KLO25-3352	HEREDITARY HEMOLYTIC ANEMIA PANEL (FOR RBC MEMBRANE DISORDERS AND ENZYMOPATHIES) (M)	36000	36000	36000
KLO25-3353	HEREDITARY MULTIPLE EXOSTOSES PANEL (M)	17000	17000	17000
KLO25-3354	HEREDITARY PANCREATIC PANEL	9000	9000	9000
KLO25-3355	HEREDITARY PANCREATITIS GENE PANEL (M)	25000	25000	25000
KLO25-3356	HEREDITARY PANCREATITIS PANEL	102000	102000	102000
KLO25-3357	HEREDITARY SPASTIC PARAPLEGIA GENE PANEL (BS)	45600	45600	45600
KLO25-3358	HEREDITARY SPASTIC PARAPLEGIA GENE PANEL (M)	17000	17000	17000
KLO25-3359	HEREDITARY SPHEROCYTOSIS GENE PANEL (M)	36000	36000	36000
KLO25-3360	HERPES SIMPLEX VIRUS (HSV)-2 IgG -CSF	2500	2500	2500
KLO25-3361	HERPES SIMPLEX VIRUS (HSV)-2 IgM -CSF	2500	2500	2500
KLO25-3362	HERPES SIMPLEX VIRUS (HSV)-2-IgG	840	840	840
KLO25-3363	HERPES SIMPLEX VIRUS (HSV)-2-IgM	840	840	840
KLO25-3364	HERPES SIMPLEX VIRUS (HSV)-I-IgG	840	840	840
KLO25-3365	HERPES SIMPLEX VIRUS (HSV)-I-IgM	840	840	840
KLO25-3366	HERPES SIMPLEX VIRUS TYPE 1 & 2 PCR QUALITATIVE	6600	6600	6600
KLO25-3367	HERPES SIMPLEX VIRUS TYPE 1 & 2 PCR QUANTTITIVE. (USA)	8260	8260	8260
KLO25-3368	HERPES SIMPLEX VIRUS TYPE 1 PCR QUALITATIVE	3650	3650	3650
KLO25-3369	HERPES SIMPLEX VIRUS TYPE 2 PCR QUALITATIVE	3700	3700	3700
KLO25-3370	HERPES VIRUS 6 (HHV-6) ANTIBODY PANEL, IgG & IgM	7300	7300	7300
KLO25-3371	HERPES VIRUS 6 ANTIBODY PANEL	13330	13330	13330
KLO25-3372	HERPES VIRUS 6 DNA,PCR	13540	13540	13540
KLO25-3373	HERPES VIRUS 8 (HHV8) -DNA PCR	12460	12460	12460
KLO25-3374	HERPES VIRUS 8, IgG ANTIBODY IFA	8310	8310	8310
KLO25-3375	HETEROPHILE , MONO SCREEN	2190	2190	2190
KLO25-3376	HETEROPHILE ANTIBODIES (HA) (INFECTIOUS MONONUCLEOSIS)	1500	1500	1500
KLO25-3377	HETEROPHILE ANTIBODY DETECTION, SERUM	1000	1000	1000
KLO25-3378	HFE gene mutations	7500	7500	7500
KLO25-3379	HFE GENE SEQUENCING (HEREDITARY HEMOCHROMATOSIS GENE) (M)	33000	33000	33000
KLO25-3380	HGV (HEPATITIS G-RNA)DETECTION, PLASMA, PCR	6100	6100	6100
KLO25-3381	HHH SYNDROME -HYPERORNITHINEMIA HYPERAMMONEMIA HOMOCITRULLINURIA	7600	7600	7600
KLO25-3382	HIB-IGG ANTIBODIES TO HEMOPHILUS INFLUENZA B, SERUM	2440	2440	2440
KLO25-3383	HIRSTUISM EVALUATION PANEL	5500	5500	5500
KLO25-3384	HIRSTUISM SCREENING PANEL	3500	3500	3500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3385	HIRSUTISM PANEL	4500	4500	4500
KLO25-3386	HIRSUTISM PANEL 1	3100	3100	3100
KLO25-3387	HIRSUTISM PANEL 2	5100	5100	5100
KLO25-3388	HIRSUTISM PROFILE-3	7000	7000	7000
KLO25-3389	HISTAMINE	7230	7230	7230
KLO25-3390	HISTAMINE, 24 HOUR URINE	16020	16020	16020
KLO25-3391	HISTIDINE, SCREEN, SERUM	5950	5950	5950
KLO25-3392	HISTIDINE, SCREEN, URINE	5950	5950	5950
KLO25-3393	HISTO/CYTOPATHOLOGY, MICROPHOTOGRAPHY	260	260	260
KLO25-3394	HISTOCYTOCHEMISTRY PEROXIDASE STAIN	500	500	500
KLO25-3395	HISTOCYTOCHEMISTRY COPPER STAIN	540	540	540
KLO25-3396	HISTOCYTOCHEMISTRY SUDAN BLACK	500	500	500
KLO25-3397	HISTOPATHOLOGICAL EXAMINATIN -FOETAL AUTOPSY	5000	5000	5000
KLO25-3398	HISTOPATHOLOGICAL EXAMINATION - HEAD & NECK CANCER (HNSCC PROFILE)	6500	6500	6500
KLO25-3399	HISTOPATHOLOGICAL EXAMINATION -HIRSCHSPRUNGS DISEASE	3700	3700	3700
KLO25-3400	HISTOPATHOLOGY BONE BIOPSY IRON STAIN	500	500	500
KLO25-3401	HISTOPATHOLOGY KIDNEY BIOPSY PANEL - I	4400	4400	4400
KLO25-3402	HISTOPATHOLOGY LUNG CARCINOMA (NSCLC) PROFILE	12000	12000	12000
KLO25-3403	HISTOPATHOLOGY STAIN-ALCIAN BLUE	540	540	540
KLO25-3404	HISTOPATHOLOGY STAIN-BLEACH STAIN & REPORTING	500	500	500
KLO25-3405	HISTOPATHOLOGY STAIN-CONGO RED (AMYLOID)	540	540	540
KLO25-3406	HISTOPATHOLOGY STAIN-FONTANA MASSON	540	540	540
KLO25-3407	HISTOPATHOLOGY STAIN-GOMORI'S METHENAMINE (SILVER STAIN)	540	540	540
KLO25-3408	HISTOPATHOLOGY STAIN-MASSON TRICHROME	540	540	540
KLO25-3409	HISTOPATHOLOGY STAIN-MUCICARMINE	540	540	540
KLO25-3410	HISTOPATHOLOGY STAIN-MYELOPEROXIDASE (MPO)	450	450	450
KLO25-3411	HISTOPATHOLOGY STAIN-PHOSPHOTUNGSTIC ACID (PTAH)	540	540	540
KLO25-3412	HISTOPATHOLOGY STAIN-VAN GIESONS	540	540	540
KLO25-3413	HISTOPATHOLOGY, BIOPSY LARGE COMPLEX/CANCER SPECIMEN	4130	4130	4130
KLO25-3414	HISTOPATHOLOGY, DIF, CONJUNCTIVAL BIOPSY PANEL *C3 *C1Q *IGA * IGG *IGM	2450	2450	2450
KLO25-3415	HISTOPATHOLOGY, DIF, CONJUNCTIVAL BIOPSY, C1Q	550	550	550
KLO25-3416	HISTOPATHOLOGY, DIF, CONJUNCTIVAL BIOPSY, C3	500	500	500
KLO25-3417	HISTOPATHOLOGY, DIF, CONJUNCTIVAL BIOPSY, IGA	500	500	500
KLO25-3418	HISTOPATHOLOGY, DIF, CONJUNCTIVAL BIOPSY, IGG	500	500	500
KLO25-3419	HISTOPATHOLOGY, DIF, CONJUNCTIVAL BIOPSY, IGM	500	500	500
KLO25-3420	HISTOPATHOLOGY, DIF, KIDNEY BIOPSY, C3	500	500	500
KLO25-3421	HISTOPATHOLOGY, DIF, KIDNEY BIOPSY, C1Q	500	500	500
KLO25-3422	HISTOPATHOLOGY, DIF, KIDNEY BIOPSY, IGA	500	500	500
KLO25-3423	HISTOPATHOLOGY, DIF, KIDNEY BIOPSY, IGG	500	500	500
KLO25-3424	HISTOPATHOLOGY, DIF, KIDNEY BIOPSY, IGM	500	500	500
KLO25-3425	HISTOPATHOLOGY, DIF, SKIN BIOPSY PANEL, * C3 *C1Q *IGA *IGG * IGM	3700	3700	3700
KLO25-3426	HISTOPATHOLOGY, DIF, SKIN BIOPSY, C1Q	500	500	500
KLO25-3427	HISTOPATHOLOGY, DIF, SKIN BIOPSY, C3	550	550	550
KLO25-3428	HISTOPATHOLOGY, DIF, SKIN BIOPSY, IGA	550	550	550

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3429	HISTOPATHOLOGY, DIF, SKIN BIOPSY, IGG	550	550	550
KLO25-3430	HISTOPATHOLOGY, DIF, SKIN BIOPSY, IGM	550	550	550
KLO25-3431	HISTOPATHOLOGY, KIDNEY BIOPSY PANEL 2	1900	1900	1900
KLO25-3432	HISTOPATHOLOGY, KIDNEY BIOPSY PANEL-3	10900	10900	10900
KLO25-3433	HISTOPATHOLOGY, LIVER BIOPSY PANEL	1850	1850	1850
KLO25-3434	HISTOPATHOLOGY, POLARISING MICROSCOPY	400	400	400
KLO25-3435	HISTOPATHOLOGY, SKIN BIOPSY PANEL	1230	1230	1230
KLO25-3436	HISTOPATHOLOGY-DIERCT IMMUNOFLUORESCENCE, KIDNEY BIOPSY	3150	3150	3150
KLO25-3437	HISTOPINE EXPERT OPINION	7000	7000	7000
KLO25-3438	HISTOPLASMA CAPSULATUM ANTIBODY, SCREEN	5460	5460	5460
KLO25-3439	HISTOPLASMA ANTIBODY COMPLIMENT FIXATION	7810	7810	7810
KLO25-3440	HISTOPLASMA ANTIBODY IMMUNO-DIFFUSION	4130	4130	4130
KLO25-3441	HISTOPLASMA -IMMUNODIFFUSION	14500	14500	14500
KLO25-3442	HISTOPLASMA IMMUNODIFFUSION -ID	9420	9420	9420
KLO25-3443	HIT-HEPARIN INDUCED THROMBOCYTOPENIA, BLOOD	3500	3500	3500
KLO25-3444	HIT-HEPARIN INDUCED THROMBOCYTOPENIA, BLOOD (GEL CARD)	3100	3100	3100
KLO25-3445	HIV - 1 RNA, QUANTITATIVE RT - PCR	5400	5400	5400
KLO25-3446	HIV QUALITATIVE (BS)	2400	2400	2400
KLO25-3447	HIV 1 & 2 ANTIBODIES SCREENING TEST INCLUDES P 24 ANTIGEN	480	480	480
KLO25-3448	HIV 1 & 2 ANTIBODY, WESTERN BLOT	3600	3600	3600
KLO25-3449	HIV-- 1 DNA DETECTOR QUALTITATIVE	3500	3500	3500
KLO25-3450	HIV -1 GENOTYPING & DRUG RESIS	21000	21000	21000
KLO25-3451	HIV 1 RNA QUALITATIVE	12040	12040	12040
KLO25-3452	HIV 1 RNA QUANTITATIVE, REAL TIME PCR WITH CD3 / CD4 (IMMUNE DEFICIENCY PANEL 4) MARKERS	6700	6700	6700
KLO25-3453	HIV 1 RNA QUANTITATIVE, REAL TIME PCR WITH CD3, CD4/ CD8 (IMMUNE DEFICIENCY PANEL 2) MARKERS	7600	7600	7600
KLO25-3454	HIV -1 WESTERN BLOT	3360	3360	3360
KLO25-3455	HIV -1, RNA DETECTION QUALITATIVE),PLASMA, PCR	2800	2800	2800
KLO25-3456	HIV 1/HIV 2 ANTIBODY, 3RD GENERATION	480	480	480
KLO25-3457	HIV 2 ANTIBODY, IMMUNOBLOT	12970	12970	12970
KLO25-3458	HIV COMBO	7000	7000	7000
KLO25-3459	HIV COMPREHENSIVE PANEL	3450	3450	3450
KLO25-3460	HIV EARLY DETECTION PROFILE	3800	3800	3800
KLO25-3461	HIV GENOTYPING	17600	17600	17600
KLO25-3462	HIV MONITOR (VIRAL LOAD-CD4/CD8)	7200	7200	7200
KLO25-3463	HIV PROGNOSTICATOR PANEL	7560	7560	7560
KLO25-3464	HIV PROVIRAL DNA (BS)	2400	2400	2400
KLO25-3465	HIV-1 CORECEPTOR TROPISM- GENOTYPIC	6000	6000	6000
KLO25-3466	HIV-1 DRUG RESISTANCE - (PI,NRTI, NNRTI)	22700	22700	22700
KLO25-3467	HIV-1 DRUG RESISTANCE - INTEGRASE INHIBITOR RESISTANCE	4500	4500	4500
KLO25-3468	HIV-1 GENOTYPE RESISTANCE	14000	14000	14000
KLO25-3469	HIV-1 PROVIRAL DNA, BLOOD-PCR	5500	5500	5500
KLO25-3470	HIV-1 QUANTITATIVE PCR, EXPANDED RANGE	6450	6450	6450
KLO25-3471	HIV-2 DETECTION , PCR	5000	5000	5000
KLO25-3472	HIV-2 RNA DETECTION (QUALITATIVE),PCR	5000	5000	5000

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3473	HIV-2 RNA/DNA DETECTION, (QUANTITATIVE), PCR	12970	12970	12970
KLO25-3474	HIV-2 VIRAL LOAD , PCR	5500	5500	5500
KLO25-3475	HIV-P24 ANTIGEN SCREENING, SERUM	900	900	900
KLO25-3476	HIV-VIRTUAL PHENOTYPING DRUG RESISTANCE TEST, PLASMA	16500	16500	16500
KLO25-3477	HL TV-I/II ANTIBODY-LIA	15150	15150	15150
KLO25-3478	HLA - ABC TYPING FOR DISEASES ASSOCIATION	10300	10300	10300
KLO25-3479	HLA CLASS I (A.B) DNA TYPING	7400	7400	7400
KLO25-3480	HLA - DNA HIGH RESOLUTION - A LOCUS	6500	6500	6500
KLO25-3481	HLA - DNA HIGH RESOLUTION - B LOCUS	6500	6500	6500
KLO25-3482	HLA - DNA HIGH RESOLUTION - C LOCUS	6500	6500	6500
KLO25-3483	HLA - DNA HIGH RESOLUTION - DQB1 LOCUS	6500	6500	6500
KLO25-3484	HLA - DNA HIGH RESOLUTION - DRB1 LOCUS	6500	6500	6500
KLO25-3485	HLA - DNA HIGH RESOLUTION -, A,B,C, DR & DQ	24000	24000	24000
KLO25-3486	HLA - DR (CLASS II) TYPING	7400	7400	7400
KLO25-3487	HLA - DR7 DISEASE ASSOCIATION	4300	4300	4300
KLO25-3488	HLA - HYPERSENSITIVITY (ABACAVIR)	6000	6000	6000
KLO25-3489	HLA - NARCOLEPSY	6200	6200	6200
KLO25-3490	HLA - PANEL REACTIVE IGG ANTIBODIES (PRA), CLASS I, QUANTITATIVE	10500	10500	10500
KLO25-3491	HLA - PANEL REACTIVE IGG ANTIBODIES (PRA), CLASS II, QUANTITATIVE	10500	10500	10500
KLO25-3492	HLA - PANEL REACTIVE IgG ANTIBODIES, CLASS I, QUANTITATIVE	9900	9900	9900
KLO25-3493	HLA - PANEL REACTIVE IgG ANTIBODIES, CLASS II, QUANTITATIVE	9900	9900	9900
KLO25-3494	HLA - PANEL REACTIVE IgG ANTIBODIES, SCREEN	5790	5790	5790
KLO25-3495	HLA - T & B CELL LYMPHOCYTE, CROSS MATCH	1750	1750	1750
KLO25-3496	HLA - T & B CELL LYMPHOCYTE, CROSS MATCH, FLOWCYTOMETRY	3750	3750	3750
KLO25-3497	HLA 51 DNA ANALYSIS (QUALITATIVE)	4600	4600	4600
KLO25-3498	HLA A, B, C, DR (ANY ONE) (BS)	4200	4200	4200
KLO25-3499	HLA A, B, C, DR, DQ (BS)	21600	21600	21600
KLO25-3500	HLA A, B, DR (BS)	12000	12000	12000
KLO25-3501	HLA A2	4300	4300	4300
KLO25-3502	HLA AUTOANTIBODY DETECTION	1000	1000	1000
KLO25-3503	HLA -B15 BY PCR	4600	4600	4600
KLO25-3504	HLA B15 LOCUS	8000	8000	8000
KLO25-3505	HLA- B22	4300	4300	4300
KLO25-3506	HLA B27 (BS)	2400	2400	2400
KLO25-3507	HLA -B27 DISEASE ASSOCIATED FOR FLOWCYTOMETERY	2400	2400	2400
KLO25-3508	HLA B27 STUDIES EUROARRAY	2000	2000	2000
KLO25-3509	HLA B27 STUDIES MICROLYMPHOCYTOTOXICITY	3600	3600	3600
KLO25-3510	HLA -B38 BY PCR	4300	4300	4300
KLO25-3511	HLA -B38 LOCUS	8000	8000	8000
KLO25-3512	HLA B5 DISEASE ASSOCIATION	4600	4600	4600
KLO25-3513	HLA -B5 LOCUS	9270	9270	9270
KLO25-3514	HLA B51 DNA TYPING	7000	7000	7000
KLO25-3515	HLA -B51 LOCUS	9270	9270	9270
KLO25-3516	HLA -B7	4600	4600	4600

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3517	HLA B8 DISEASE ASSOCIATION	4600	4600	4600
KLO25-3518	HLA- B8 LOCUS	9270	9270	9270
KLO25-3519	HLA BW 15 DISEASE ASSOCIATION	7000	7000	7000
KLO25-3520	HLA BW 38 DISEASE ASSOCIATION	4600	4600	4600
KLO25-3521	HLA -C LOCUS TYPING , ANY ANTIGEN	4600	4600	4600
KLO25-3522	HLA CADAVERIC CROSS MATCH	5500	5500	5500
KLO25-3523	HLA CELIAC DISEASE (DQB1*02, 1*03, DQA1*05;01)	5700	5700	5700
KLO25-3524	HLA DNA TYPING FOR BONE MARROW TRANSPLANT PLR	21000	21000	21000
KLO25-3525	HLA DNA TYPING FOR KIDNEY / LIVER TRANSPLANT, PCR (ABDR TYPING)	14800	14800	14800
KLO25-3526	HLA DNA TYPING FOR KIDNEY TRANSPORT PLR	14800	14800	14800
KLO25-3527	HLA DQ- Alpha & Beta- Individual	12000	12000	12000
KLO25-3528	HLA DR2 DIEASE ASSOCIATION	4300	4300	4300
KLO25-3529	HLA DR3, DISEASE ASSOCIATION	4300	4300	4300
KLO25-3530	HLA DR4 DISEASE ASSOCATION	4300	4300	4300
KLO25-3531	HLA DR5 DISEASE ASSOCATION	4300	4300	4300
KLO25-3532	HLA- LIFECODE SINGLE ANTIGEN CLASS I	10000	10000	10000
KLO25-3533	HLA- LIFECODE SINGLE ANTIGEN CLASS I & II	20000	20000	20000
KLO25-3534	HLA -LIFECODE SINGLE ANTIGEN CLASS II	10000	10000	10000
KLO25-3535	HLA PANEL REACTIVE ANTIBODY, HLA - PRA	8500	8500	8500
KLO25-3536	HLA PRE -TRANSPLANT WORKUP SENSITIZED RECIPIENT PANEL	55000	55000	55000
KLO25-3537	HLA PRE-TRANSPLANT WORKUP NON SENSITIZED RECIPIENT PANEL1	19000	19000	19000
KLO25-3538	HLA PRE-TRANSPLANT WORKUP PANEL 2	20500	20500	20500
KLO25-3539	HLA PRE-TRANSPLANT WORKUP SENSITIZED RECIPIENT PANEL 4	58700	58700	58700
KLO25-3540	HLA SINGLE ANTIGEN BEAD ASSAY - CLASS II IgG	20000	20000	20000
KLO25-3541	HLA SINGLE ANTIGEN BEAD ASSAY- CLASS I IgG	22000	22000	22000
KLO25-3542	HLA TRANSPLANT WORKUP PANEL 2	24500	24500	24500
KLO25-3543	HLA TYPING HIGH RESOLUTION (HLA A, B, C, DRB1, DQB1) (M)	15000	15000	15000
KLO25-3544	HLA-1502 TYPING	15020	15020	15020
KLO25-3545	HLA-A HIGH RESOLUTION SBT TYPING	24670	24670	24670
KLO25-3546	HLA-A2 (A*02)	4300	4300	4300
KLO25-3547	HLA-B* 1502 FOR CARBAMAZEPINE TOXICITY (M)	6500	6500	6500
KLO25-3548	HLA-B5, BLOOD, PCR	5800	5800	5800
KLO25-3549	HLA-B8 BY PCR	5800	5800	5800
KLO25-3550	HLA-CLASS I ANTIGENS-ABC LOCUS BY SEROLOGY, BLOOD	6500	6500	6500
KLO25-3551	HLA-CLASS I-A LOCUS, BLOOD	9600	9600	9600
KLO25-3552	HLA-CLASS I-A,B, DR LOCUS, BLOOD	17500	17500	17500
KLO25-3553	HLA-CLASS I-B LOCUS, BLOOD	17000	17000	17000
KLO25-3554	HLA-CLASS I-C LOCUS, BLOOD	9100	9100	9100
KLO25-3555	HLA-CLASS II-DQ LOCUS,BLOOD	9100	9100	9100
KLO25-3556	HLA-CLASS II-DR LOCUS, BLOOD	9700	9700	9700
KLO25-3557	HLA-CW6	4300	4300	4300
KLO25-3558	HLA-DSA (DONOR SPECIFIC IgG ANTIBODIES , CLASS I & II	14500	14500	14500
KLO25-3559	HLTV -I/II ANTIBODY CONFIRMATION	12380	12380	12380
KLO25-3560	HLTV -I/II ANTIBODY SCREEN	13740	13740	13740

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3561	HNPCC/LYNCH SYNDROME PANEL	31500	31500	31500
KLO25-3562	HOMA INDEX (INSULIN/CPEPTIDE RESISTANCE TEST),SERUM	1130	1130	1130
KLO25-3563	HOMOCYSTINURIA GENE PANEL (M)	17500	17500	17500
KLO25-3564	HOMOGENTISIC ACID, URINE	750	750	750
KLO25-3565	HOMOVALLNILLIC ACID 24 HOUR URINE	4000	4000	4000
KLO25-3566	HOMOVANILLIC ACID (HVA), URINE	4000	4000	4000
KLO25-3567	HPV (HUMAN PAPILLOMA VIRUS) GENOTYPING, PCR	3400	3400	3400
KLO25-3568	HPV DNA (HUMAN PAPILLOMA VIRUS) HIGH/ LOW RISK BY PCR	8720	8720	8720
KLO25-3569	HPV DNA DETECTOR	2750	2750	2750
KLO25-3570	HPV Genotypes 16 and 18	3740	3740	3740
KLO25-3571	HPV mRNA E6/E7	8000	8000	8000
KLO25-3572	HPV mRNA E6/E7 Reflex to Genotypes 16,18/45	8000	8000	8000
KLO25-3573	HRR Gene Panel Testing	18500	18500	18500
KLO25-3574	HSV 1 & 2 QUALITATIVE (BS)	3600	3600	3600
KLO25-3575	HSV-DNA DETECTION FOR TYPE 1 AND 2 VIRUS, BLISTER FLUID	3200	3200	3200
KLO25-3576	HSV-DNA DETECTION FOR TYPE 1 AND 2 VIRUS, CSF	3200	3200	3200
KLO25-3577	HSV-DNA DETECTION FOR TYPE 1 AND 2 VIRUS, SERUM	3200	3200	3200
KLO25-3578	HSV-DNA DETECTION FOR TYPE 1 AND 2 VIRUS, ULCER SWAB	3200	3200	3200
KLO25-3579	HTLV - I/II ANTIBODY, EIA	5000	5000	5000
KLO25-3580	HTLV 1 And 2 virus Total antibody	4400	4400	4400
KLO25-3581	HTLV I/II ANTIBODY WESTERN BLOT	9990	9990	9990
KLO25-3582	HTLV -I/II ANTIBODY, SCREEN	13740	13740	13740
KLO25-3583	HTLV-I/II ANTIBODY, CONFIRMATION	12380	12380	12380
KLO25-3584	h-tTG/DGP	1900	1900	1900
KLO25-3585	HU (NEURONAL ANTIGEN), ANTIBODY, SERUM	4500	4500	4500
KLO25-3586	HUMAN ADENOVIRUS (HADV) DNA DE	8400	8400	8400
KLO25-3587	HUMAN HERPES VIRUS 7 (HHV7), QUALITATIVE PCR	3000	3000	3000
KLO25-3588	HUMAN HERPESVIRUS 6 (HHV6), QUALITATIVE PCR	3000	3000	3000
KLO25-3589	HUMAN PAPILLOMA VIRUS PCR, QUALITATIVE	1100	1100	1100
KLO25-3590	HUMAN PARECHOVIRUS QUALITATIVE, PCR	3000	3000	3000
KLO25-3591	HUMAN PLACENTAL LACTOGEN	18190	18190	18190
KLO25-3592	HUNTINGTON DISEASE (BS)	4800	4800	4800
KLO25-3593	HUNTINGTON'S DISEASE MOLECULAR ANALYSIS	5800	5800	5800
KLO25-3594	HUNTINGTONS DISEASE MUTATION DETECTION	3200	3200	3200
KLO25-3595	HUNTINGTON'S DISEASE TEST BY PCR, BLOOD	6600	6600	6600
KLO25-3596	HYBRID CAPTURE 2 HIGH RISK HPV DNA TEST	3100	3100	3100
KLO25-3597	HYDROXYPROLINE, PLASMA	5600	5600	5600
KLO25-3598	HYDROXYPROLINE, PLASMA, QUANTITATIVE (FREE)	17520	17520	17520
KLO25-3599	HYPER SENSITIVITY PNEUMONITIS SCREEN	18000	18000	18000
KLO25-3600	HYPERARGININEMIA (ARG1) GENE ANALYSIS (M)	36000	36000	36000
KLO25-3601	HYPERCALCEMIA PANEL 1	1800	1800	1800
KLO25-3602	HYPERCALCEMIA PANEL 2	3500	3500	3500
KLO25-3603	HYPERCHOLESTEROLEMIA GENE PANEL (M)	36000	36000	36000
KLO25-3604	HYPEREKPLEXIA GENE PANEL (M)	36000	36000	36000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3605	HYPER-IMMUNOGLOBULIN E SYNDROME DELETION/DUPLICATION ANALYSIS (DOCK8, STAT3) (M)	15000	15000	15000
KLO25-3606	HYPERSENSITIVITY PNEUMONITIS ANTIBODY, IGG	18000	18000	18000
KLO25-3607	HYPERSENSITIVITY PNEUMONITIS PANEL	8400	8400	8400
KLO25-3608	HYPERTHYROID / GRAVE'S DISEASE PANEL	4050	4050	4050
KLO25-3609	HYPOCHONDROPLASIA FGFR3 N540K COMMON MUTATION SCREENING (M)	15000	15000	15000
KLO25-3610	HYPOGONA DERIN PANEL-FEMALE	3800	3800	3800
KLO25-3611	HYPOGONADISM PANEL, MALES	3800	3800	3800
KLO25-3612	HYPOMYELINATION SYNDROME GENE PANEL (M)	36000	36000	36000
KLO25-3613	HYPOTHYROIDISM HASHTIMOTOS PANEL	1300	1300	1300
KLO25-3614	IA-2 ANTIBODY	5400	5400	5400
KLO25-3615	IBD PROFILE -1	5670	5670	5670
KLO25-3616	IBD PROFILE -2	9900	9900	9900
KLO25-3617	IBD SCREENING PANEL	4000	4000	4000
KLO25-3618	I-Cell Disease	2500	2500	2500
KLO25-3619	ICTHYOSIS GENE PANEL (M)	17000	17000	17000
KLO25-3620	IDH-1	2300	2300	2300
KLO25-3621	IDH1 & IDH 2 GENE MUTATION	7350	7350	7350
KLO25-3622	IDH1 GENE ANALYSIS (M)	8000	8000	8000
KLO25-3623	IDUORONATE 2 SULPHATE SULPHATASE	6500	6500	6500
KLO25-3624	IDURONATE 2 SULPHATE SULPHATASE HUNTER/MPS II	10300	10300	10300
KLO25-3625	IGA SUBCLASSES	10600	10600	10600
KLO25-3626	IgD FLOWCYTOMETRY	3270	3270	3270
KLO25-3627	IGD SERUM	7350	7350	7350
KLO25-3628	IGF - I & GROWTH HORMONE PANEL	4900	4900	4900
KLO25-3629	IGF - I; SOMATOMEDIN - C	4300	4300	4300
KLO25-3630	IGF BINDING PROTEIN - 3; IGFBP - 3	4400	4400	4400
KLO25-3631	IGF BINDING PROTEIN 2	11200	11200	11200
KLO25-3632	IGF BINDING PROTEIN I	9000	9000	9000
KLO25-3633	IGF II, INSULIN LIKE GROWTH FACTOR II	15970	15970	15970
KLO25-3634	IGF-BP-III (IGFBP-3, INSULINE LINE GROWTH)	4400	4400	4400
KLO25-3635	IGF-I (INSULINE LINE GROWTH FACTOR-1 SOMATOMEDIN	4300	4300	4300
KLO25-3636	IGG SUBCLASS 3	4520	4520	4520
KLO25-3637	IGG SUBCLASS 4	7000	7000	7000
KLO25-3638	IGG1	30000	30000	30000
KLO25-3639	IGG2	30000	30000	30000
KLO25-3640	IGG3	30000	30000	30000
KLO25-3641	IGG4	30000	30000	30000
KLO25-3642	IGVH GENE MUTATION DETECTION	10440	10440	10440
KLO25-3643	IGVH HYPERMUTATION ANALYSIS, C	21600	21600	21600
KLO25-3644	IHC PANEL-BONE MARROW, TISSUE	7300	7300	7300
KLO25-3645	IHC PANEL-BRAIN TUMOR, TISSUE	7300	7300	7300
KLO25-3646	IHC PANEL-BREAST VI- COMPREHENSIVE DIAGNOSIS	6500	6500	6500
KLO25-3647	IHC PANEL-BREAST-I, TISSUE	2500	2500	2500
KLO25-3648	IHC PANEL-BREAST-II, TISSUE	3700	3700	3700

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3649	IHC PANEL-BREAST-III, TISSUE	4500	4500	4500
KLO25-3650	IHC PANEL-BREAST-V, TISSUE	6500	6500	6500
KLO25-3651	IHC PANEL-CERVICAL CANCER, TISSUE	5800	5800	5800
KLO25-3652	IHC PANEL-LYMHNODE-II (HODGKIN'S), TISSUE	6500	6500	6500
KLO25-3653	IHC PANEL-LYMPHNODE-IV (NHL SMALL CELL TYPE), TISSUE	8500	8500	8500
KLO25-3654	IHC PANEL-LYMPHNODE-V (BURKITT LYMPHOMA), TISSUE	6500	6500	6500
KLO25-3655	IHC PANEL-LYMPHNODE-VII (LYMPHOMA V/S METASTASIS), TISSUE	6500	6500	6500
KLO25-3656	IHC PANEL-MESENCHYMAL INTESTINAL NEOPLASM-IHC PANEL, TISSUE	6500	6500	6500
KLO25-3657	IHC PANEL-METASTATIC GERM CELL TUMOR / GERMINOMA, TISSUE	5000	5000	5000
KLO25-3658	IHC PANEL-PITIUARY LESION	8500	8500	8500
KLO25-3659	IHC PANEL-ROUND CELL TUMOR IHC (ADULT), TISSUE	7200	7200	7200
KLO25-3660	IHC PANEL-ROUND CELL TUMOR, PAEDIATRIC	6500	6500	6500
KLO25-3661	IHC PANEL-SOFT TISSUE TUMOR, TISSUE	8500	8500	8500
KLO25-3662	IL28B Genotyping	4500	4500	4500
KLO25-3663	IMATINIB RESISTANCE (ABL KINASE) MUTATION ANALYSIS - IRMA (M)	8400	8400	8400
KLO25-3664	IMATINIB RESISTANCE MUTATION ANALYSIS	9800	9800	9800
KLO25-3665	IMD PANEL QUANTITATIVE, BLOOD	4300	4300	4300
KLO25-3666	IMD PANEL, EXTENDED	10800	10800	10800
KLO25-3667	IMIPRAMINE	10200	10200	10200
KLO25-3668	IMMATURE PLATELET FRACTION	660	660	660
KLO25-3669	IMMATURE PLATELET FRACTION.-IPF (M)	660	660	660
KLO25-3670	IMMIGRATION /IMMUNIZATION CHECK PANEL, ADVANCED	8770	8770	8770
KLO25-3671	IMMIGRATION /IMMUNIZATION CHECK PANEL, BASIC	5080	5080	5080
KLO25-3672	IMMUNE COMPLEX DETECTION BY C1 Q BINDING	7740	7740	7740
KLO25-3673	IMMUNE DEFICIENCY PANEL 1	6700	6700	6700
KLO25-3674	IMMUNE DEFICIENCY PANEL 2	2600	2600	2600
KLO25-3675	IMMUNE DEFICIENCY PANEL 3	2200	2200	2200
KLO25-3676	IMMUNE DEFICIENCY PANEL 4	1800	1800	1800
KLO25-3677	IMMUNE DEFICIENCY PANEL 5	2800	2800	2800
KLO25-3678	IMMUNOFIXATION ELECTROPHOROSIS	6700	6700	6700
KLO25-3679	IMMUNOFIXATION ELECTROPHOROSIS, 24 HRS. URINE	8200	8200	8200
KLO25-3680	IMMUNOFIXATION QUNTIFICATION (IGG,IGA,IGM)	8190	8190	8190
KLO25-3681	IMMUNOFIXATION-QUALITATIVE, CSF	9000	9000	9000
KLO25-3682	IMMUNOFIXATION-QUALITATIVE, URINE	8500	8500	8500
KLO25-3683	IMMUNOFIXATION-QUANTITATIVE, SERUM	7100	7100	7100
KLO25-3684	IMMUNOFIXATION-QUANTITATIVE, URINE	7900	7900	7900
KLO25-3685	IMMUNOGLOBULIN IGA (IgA)	720	720	720
KLO25-3686	IMMUNOGLOBULIN IGA (L)	390	390	390
KLO25-3687	IMMUNOGLOBULIN IGA, CSF	1380	1380	1380
KLO25-3688	IMMUNOGLOBULIN IgD	7350	7350	7350
KLO25-3689	IMMUNOGLOBULIN IGD & IGE TYPING	7500	7500	7500
KLO25-3690	IMMUNOGLOBULIN IGD & IGE TYPING URINE	8400	8400	8400
KLO25-3691	IMMUNOGLOBULIN IGG	720	720	720
KLO25-3692	IMMUNOGLOBULIN IGG (L)	390	390	390

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3693	IMMUNOGLOBULIN IGG SUBCLASS 4	7000	7000	7000
KLO25-3694	IMMUNOGLOBULIN IGG SUBCLASSES IGG1, IGG2, IGG3, IGG4 & TOTAL IGG	14150	14150	14150
KLO25-3695	IMMUNOGLOBULIN IGG SYNTHESIS INDEX & RATE	2450	2450	2450
KLO25-3696	IMMUNOGLOBULIN IGG, CSF	1380	1380	1380
KLO25-3697	IMMUNOGLOBULIN IGM	720	720	720
KLO25-3698	IMMUNOGLOBULIN IGM (L)	470	470	470
KLO25-3699	IMMUNOGLOBULIN IGM CSF	5270	5270	5270
KLO25-3700	IMMUNOGLOBULIN PROFILE (IGG,IGM,IGA)	1040	1040	1040
KLO25-3701	IMMUNOGLOBULIN PROFILE CSF	4100	4100	4100
KLO25-3702	IMMUNOGLOBULIN PROFILE CSF -USA (IGG,IGM,IGA)	12040	12040	12040
KLO25-3703	IMMUNOHISTOCEMISTRY - FSH	1900	1900	1900
KLO25-3704	IMMUNOHISTOCHEMISTRY - AMACR	2200	2200	2200
KLO25-3705	IMMUNOHISTOCHEMISTRY - ANY ONE MARKER (SRL)	2700	2700	2700
KLO25-3706	IMMUNOHISTOCHEMISTRY - BETA CATENIN	2300	2300	2300
KLO25-3707	IMMUNOHISTOCHEMISTRY - CALDESMON	2300	2300	2300
KLO25-3708	IMMUNOHISTOCHEMISTRY - DOG-1	1900	1900	1900
KLO25-3709	IMMUNOHISTOCHEMISTRY - FACTOR VIII	2200	2200	2200
KLO25-3710	IMMUNOHISTOCHEMISTRY - GALECTIN -3	2300	2300	2300
KLO25-3711	IMMUNOHISTOCHEMISTRY - GCDFP15	2200	2200	2200
KLO25-3712	IMMUNOHISTOCHEMISTRY - GLYPICAN	2300	2300	2300
KLO25-3713	IMMUNOHISTOCHEMISTRY - HBsAG	2700	2700	2700
KLO25-3714	IMMUNOHISTOCHEMISTRY - LYSOYME	2200	2200	2200
KLO25-3715	IMMUNOHISTOCHEMISTRY - MESOTHELIN	2200	2200	2200
KLO25-3716	IMMUNOHISTOCHEMISTRY - MOC 31	2200	2200	2200
KLO25-3717	IMMUNOHISTOCHEMISTRY - OCT2	2200	2200	2200
KLO25-3718	IMMUNOHISTOCHEMISTRY - PD-L1	5400	5400	5400
KLO25-3719	IMMUNOHISTOCHEMISTRY 34 BETA E12- STAIN ONLY	1520	1520	1520
KLO25-3720	IMMUNOHISTOCHEMISTRY 34-BETA E12	2300	2300	2300
KLO25-3721	IMMUNOHISTOCHEMISTRY ACTH	1900	1900	1900
KLO25-3722	IMMUNOHISTOCHEMISTRY ACTIN	1900	1900	1900
KLO25-3723	IMMUNOHISTOCHEMISTRY ACTIN, TISSUE	1900	1900	1900
KLO25-3724	IMMUNOHISTOCHEMISTRY AFP (ALPHA FETO PROTEIN)	1900	1900	1900
KLO25-3725	IMMUNOHISTOCHEMISTRY AFP (ALPHA FETO PROTEIN)-STAIN ONLY	1900	1900	1900
KLO25-3726	IMMUNOHISTOCHEMISTRY ALK (D5F3) NSCLC	4800	4800	4800
KLO25-3727	IMMUNOHISTOCHEMISTRY ALK1	1760	1760	1760
KLO25-3728	IMMUNOHISTOCHEMISTRY ALK1, TISSU	1760	1760	1760
KLO25-3729	IMMUNOHISTOCHEMISTRY ALPHA -1 (ANTI TRYPSIN)	2700	2700	2700
KLO25-3730	IMMUNOHISTOCHEMISTRY ANY ONE MARKER WITHOUT INTERPRETATION	1520	1520	1520
KLO25-3731	IMMUNOHISTOCHEMISTRY ANY ONE STAIN	1520	1520	1520
KLO25-3732	IMMUNOHISTOCHEMISTRY ATRX	2300	2300	2300
KLO25-3733	IMMUNOHISTOCHEMISTRY BCL-2	1900	1900	1900
KLO25-3734	IMMUNOHISTOCHEMISTRY BCL-2 STAIN	1520	1520	1520
KLO25-3735	IMMUNOHISTOCHEMISTRY BCL-6 (ONCOPROTEIN)	2200	2200	2200
KLO25-3736	IMMUNOHISTOCHEMISTRY BCL-6 (ONCOPROTEIN)-STAIN	1520	1520	1520

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3737	IMMUNOHISTOCHEMISTRY -BER-EP4 (EPCAM)	2300	2300	2300
KLO25-3738	IMMUNOHISTOCHEMISTRY BREAST IV (FOR MYOEPITHELIAL CELLS)	6500	6500	6500
KLO25-3739	IMMUNOHISTOCHEMISTRY C4D	2300	2300	2300
KLO25-3740	IMMUNOHISTOCHEMISTRY CALCITONIN STAIN	1520	1520	1520
KLO25-3741	IMMUNOHISTOCHEMISTRY CALCITONIN TISSUE	1900	1900	1900
KLO25-3742	IMMUNOHISTOCHEMISTRY CALPONIN STAIN	1520	1520	1520
KLO25-3743	IMMUNOHISTOCHEMISTRY CALPONIN TISSUE	2200	2200	2200
KLO25-3744	IMMUNOHISTOCHEMISTRY CALRETININ	1900	1900	1900
KLO25-3745	IMMUNOHISTOCHEMISTRY CARLETENIN- STAIN	1520	1520	1520
KLO25-3746	IMMUNOHISTOCHEMISTRY CARLETENIN -TISSUE	2200	2200	2200
KLO25-3747	IMMUNOHISTOCHEMISTRY CATHEPSIN - D ESTROGEN REGULATED PROTEIN	1900	1900	1900
KLO25-3748	IMMUNOHISTOCHEMISTRY CATHEPSIN-D (STAIN)	1520	1520	1520
KLO25-3749	IMMUNOHISTOCHEMISTRY CAVOELIN	2200	2200	2200
KLO25-3750	IMMUNOHISTOCHEMISTRY CAVOELIN -STAIN	1520	1520	1520
KLO25-3751	IMMUNOHISTOCHEMISTRY CD - 10	2300	2300	2300
KLO25-3752	IMMUNOHISTOCHEMISTRY CD - 117	1900	1900	1900
KLO25-3753	IMMUNOHISTOCHEMISTRY CD - 23	2300	2300	2300
KLO25-3754	IMMUNOHISTOCHEMISTRY CD - 31 (ANGIOGENESIS MARKER)	1900	1900	1900
KLO25-3755	IMMUNOHISTOCHEMISTRY CD - 8	1900	1900	1900
KLO25-3756	IMMUNOHISTOCHEMISTRY CD - 99	1900	1900	1900
KLO25-3757	IMMUNOHISTOCHEMISTRY CD 10 STAIN	1520	1520	1520
KLO25-3758	IMMUNOHISTOCHEMISTRY CD 117-STAIN	1520	1520	1520
KLO25-3759	IMMUNOHISTOCHEMISTRY CD 138	1900	1900	1900
KLO25-3760	IMMUNOHISTOCHEMISTRY CD 138 -STAIN	1520	1520	1520
KLO25-3761	IMMUNOHISTOCHEMISTRY CD 2	2700	2700	2700
KLO25-3762	IMMUNOHISTOCHEMISTRY CD 2 WITHOUT INTERPRETATION	1520	1520	1520
KLO25-3763	IMMUNOHISTOCHEMISTRY CD 20	1900	1900	1900
KLO25-3764	IMMUNOHISTOCHEMISTRY CD 20 STAIN	1520	1520	1520
KLO25-3765	IMMUNOHISTOCHEMISTRY CD 21	1900	1900	1900
KLO25-3766	IMMUNOHISTOCHEMISTRY CD 21 STAIN	1520	1520	1520
KLO25-3767	IMMUNOHISTOCHEMISTRY CD 22	2700	2700	2700
KLO25-3768	IMMUNOHISTOCHEMISTRY CD 22 STAIN	1520	1520	1520
KLO25-3769	IMMUNOHISTOCHEMISTRY CD 23 STAIN	1520	1520	1520
KLO25-3770	IMMUNOHISTOCHEMISTRY CD 3 STAIN	1520	1520	1520
KLO25-3771	IMMUNOHISTOCHEMISTRY CD 30 STAIN	1520	1520	1520
KLO25-3772	IMMUNOHISTOCHEMISTRY CD 31 STAIN	1520	1520	1520
KLO25-3773	IMMUNOHISTOCHEMISTRY CD 34 STAIN	1520	1520	1520
KLO25-3774	IMMUNOHISTOCHEMISTRY CD 34 STEM CELLS	1900	1900	1900
KLO25-3775	IMMUNOHISTOCHEMISTRY CD 4	1900	1900	1900
KLO25-3776	IMMUNOHISTOCHEMISTRY CD 43	2700	2700	2700
KLO25-3777	IMMUNOHISTOCHEMISTRY CD 43 STAIN	1520	1520	1520
KLO25-3778	IMMUNOHISTOCHEMISTRY CD 45 -STAIN	1520	1520	1520
KLO25-3779	IMMUNOHISTOCHEMISTRY CD 5	1900	1900	1900
KLO25-3780	IMMUNOHISTOCHEMISTRY CD 5 STAIN	1520	1520	1520

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3781	IMMUNOHISTOCHEMISTRY CD 56	1900	1900	1900
KLO25-3782	IMMUNOHISTOCHEMISTRY CD 56-STAIN	1520	1520	1520
KLO25-3783	IMMUNOHISTOCHEMISTRY CD 57	2200	2200	2200
KLO25-3784	IMMUNOHISTOCHEMISTRY CD 57-STAIN	1520	1520	1520
KLO25-3785	IMMUNOHISTOCHEMISTRY CD 61	2200	2200	2200
KLO25-3786	IMMUNOHISTOCHEMISTRY CD 68	1900	1900	1900
KLO25-3787	IMMUNOHISTOCHEMISTRY CD 68-STAIN	1520	1520	1520
KLO25-3788	IMMUNOHISTOCHEMISTRY CD 7	2300	2300	2300
KLO25-3789	IMMUNOHISTOCHEMISTRY CD 79A -STAIN	1520	1520	1520
KLO25-3790	IMMUNOHISTOCHEMISTRY CD 99 -STAIN	1520	1520	1520
KLO25-3791	IMMUNOHISTOCHEMISTRY CD-15	1900	1900	1900
KLO25-3792	IMMUNOHISTOCHEMISTRY CD1A	1900	1900	1900
KLO25-3793	IMMUNOHISTOCHEMISTRY CD1A -STAIN	1520	1520	1520
KLO25-3794	IMMUNOHISTOCHEMISTRY CD-3	1900	1900	1900
KLO25-3795	IMMUNOHISTOCHEMISTRY CD-30	1900	1900	1900
KLO25-3796	IMMUNOHISTOCHEMISTRY CD-34	1900	1900	1900
KLO25-3797	IMMUNOHISTOCHEMISTRY CD-35	1900	1900	1900
KLO25-3798	IMMUNOHISTOCHEMISTRY CD-45 LEUCOCYTE COMMON AG)	2200	2200	2200
KLO25-3799	IMMUNOHISTOCHEMISTRY CD45 RO (PAN T)	1900	1900	1900
KLO25-3800	IMMUNOHISTOCHEMISTRY CD-68	1900	1900	1900
KLO25-3801	IMMUNOHISTOCHEMISTRY CD-79A	2300	2300	2300
KLO25-3802	IMMUNOHISTOCHEMISTRY CDK4	2200	2200	2200
KLO25-3803	IMMUNOHISTOCHEMISTRY CEA	1900	1900	1900
KLO25-3804	IMMUNOHISTOCHEMISTRY CEA- STAIN	1520	1520	1520
KLO25-3805	IMMUNOHISTOCHEMISTRY CERB- STAIN	1520	1520	1520
KLO25-3806	IMMUNOHISTOCHEMISTRY CHROMO GRANIN A	1900	1900	1900
KLO25-3807	IMMUNOHISTOCHEMISTRY CHROMOGRANIN-A -STAIN	1520	1520	1520
KLO25-3808	IMMUNOHISTOCHEMISTRY CK 10	2200	2200	2200
KLO25-3809	IMMUNOHISTOCHEMISTRY CK 10- STAIN	1520	1520	1520
KLO25-3810	IMMUNOHISTOCHEMISTRY CK 19	2300	2300	2300
KLO25-3811	IMMUNOHISTOCHEMISTRY CK 19- STAIN	1520	1520	1520
KLO25-3812	IMMUNOHISTOCHEMISTRY CK 20	2300	2300	2300
KLO25-3813	IMMUNOHISTOCHEMISTRY CK 5/6	1900	1900	1900
KLO25-3814	IMMUNOHISTOCHEMISTRY CK 5/6- STAIN	1520	1520	1520
KLO25-3815	IMMUNOHISTOCHEMISTRY CK 7	1900	1900	1900
KLO25-3816	IMMUNOHISTOCHEMISTRY CK 8	2200	2200	2200
KLO25-3817	IMMUNOHISTOCHEMISTRY CK 8- STAIN	1520	1520	1520
KLO25-3818	IMMUNOHISTOCHEMISTRY -C-MYC	2300	2300	2300
KLO25-3819	IMMUNOHISTOCHEMISTRY CUSTOM PANEL	7300	7300	7300
KLO25-3820	IMMUNOHISTOCHEMISTRY CYCLIN D1	2200	2200	2200
KLO25-3821	IMMUNOHISTOCHEMISTRY CYCLIN D1 -STAIN	1520	1520	1520
KLO25-3822	IMMUNOHISTOCHEMISTRY CYTOKERATIN (PANCYTOKERATIN)	1900	1900	1900
KLO25-3823	IMMUNOHISTOCHEMISTRY CYTOKERATIN 20	2300	2300	2300
KLO25-3824	IMMUNOHISTOCHEMISTRY CYTOKERATIN 8	1900	1900	1900

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3825	IMMUNOHISTOCHEMISTRY CYTOMEGALOVIRUS (CMV)	2000	2000	2000
KLO25-3826	IMMUNOHISTOCHEMISTRY DBA 44	2200	2200	2200
KLO25-3827	IMMUNOHISTOCHEMISTRY DESMIN	1900	1900	1900
KLO25-3828	IMMUNOHISTOCHEMISTRY DESMIN-STAIN	1900	1900	1900
KLO25-3829	IMMUNOHISTOCHEMISTRY E CADHERIN	2200	2200	2200
KLO25-3830	IMMUNOHISTOCHEMISTRY E CADHERIN- STAIN	2200	2200	2200
KLO25-3831	IMMUNOHISTOCHEMISTRY EBV	2200	2200	2200
KLO25-3832	IMMUNOHISTOCHEMISTRY EBV -STAIN	1520	1520	1520
KLO25-3833	IMMUNOHISTOCHEMISTRY EGFR (EPIDERMAL GROWTH FACTOR)	2300	2300	2300
KLO25-3834	IMMUNOHISTOCHEMISTRY -EIGHT MARKERS	8500	8500	8500
KLO25-3835	IMMUNOHISTOCHEMISTRY EMA -STAIN	1900	1900	1900
KLO25-3836	IMMUNOHISTOCHEMISTRY EPITHELIAL MEMBRANE ANTIGEN - EMA	1900	1900	1900
KLO25-3837	IMMUNOHISTOCHEMISTRY FERITIN	2200	2200	2200
KLO25-3838	IMMUNOHISTOCHEMISTRY -FIVE MARKERS	5820	5820	5820
KLO25-3839	IMMUNOHISTOCHEMISTRY GFAP	1900	1900	1900
KLO25-3840	IMMUNOHISTOCHEMISTRY GROWTH HORMONE	2300	2300	2300
KLO25-3841	IMMUNOHISTOCHEMISTRY HCG-BETA	2300	2300	2300
KLO25-3842	IMMUNOHISTOCHEMISTRY HCG-BETA STAIN	1520	1520	1520
KLO25-3843	IMMUNOHISTOCHEMISTRY HEP PAR-1	2200	2200	2200
KLO25-3844	IMMUNOHISTOCHEMISTRY HER-2/NEU (C-ERB B-2)-O.M	1700	1700	1700
KLO25-3845	IMMUNOHISTOCHEMISTRY HLA DR	2200	2200	2200
KLO25-3846	IMMUNOHISTOCHEMISTRY HMB-45	1900	1900	1900
KLO25-3847	IMMUNOHISTOCHEMISTRY HPV -16	2200	2200	2200
KLO25-3848	IMMUNOHISTOCHEMISTRY HPV 16- STAIN	1900	1900	1900
KLO25-3849	IMMUNOHISTOCHEMISTRY IGG4	2300	2300	2300
KLO25-3850	IMMUNOHISTOCHEMISTRY INHIBIN	1900	1900	1900
KLO25-3851	IMMUNOHISTOCHEMISTRY KAPPA LIGHT CHAINS	2300	2300	2300
KLO25-3852	IMMUNOHISTOCHEMISTRY KI-67	2300	2300	2300
KLO25-3853	IMMUNOHISTOCHEMISTRY LAMBDA LIGHT CHAINS	2300	2300	2300
KLO25-3854	IMMUNOHISTOCHEMISTRY LIVER NEOPLASM -IHC PANEL, TISSUE	6500	6500	6500
KLO25-3855	IMMUNOHISTOCHEMISTRY LUNG NEOPLASM	8720	8720	8720
KLO25-3856	IMMUNOHISTOCHEMISTRY MELAN A	2300	2300	2300
KLO25-3857	IMMUNOHISTOCHEMISTRY MLH 1	2200	2200	2200
KLO25-3858	IMMUNOHISTOCHEMISTRY MSH 2	2200	2200	2200
KLO25-3859	IMMUNOHISTOCHEMISTRY MSH -6	2700	2700	2700
KLO25-3860	IMMUNOHISTOCHEMISTRY MUM 1	2200	2200	2200
KLO25-3861	IMMUNOHISTOCHEMISTRY MYELOPEROXIDASE	1900	1900	1900
KLO25-3862	IMMUNOHISTOCHEMISTRY MYO D1	2200	2200	2200
KLO25-3863	IMMUNOHISTOCHEMISTRY MYOGENIN	2400	2400	2400
KLO25-3864	IMMUNOHISTOCHEMISTRY MYOGLOBIN	2200	2200	2200
KLO25-3865	IMMUNOHISTOCHEMISTRY NEUROBLASTOMA (NB84)	11000	11000	11000
KLO25-3866	IMMUNOHISTOCHEMISTRY NEUROFILAMENT	1900	1900	1900
KLO25-3867	IMMUNOHISTOCHEMISTRY NONSMALL CELLUNG CARCINOMA TYPING PANEL **TTF-1,CK5/6,P63	15700	15700	15700
KLO25-3868	IMMUNOHISTOCHEMISTRY NSE	1900	1900	1900

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3869	IMMUNOHISTOCHEMISTRY -P16	2200	2200	2200
KLO25-3870	IMMUNOHISTOCHEMISTRY -p16INK4a	4900	4900	4900
KLO25-3871	IMMUNOHISTOCHEMISTRY -P40	2400	2400	2400
KLO25-3872	IMMUNOHISTOCHEMISTRY P53 (TUMOR SUPRESSOR GENE)	1900	1900	1900
KLO25-3873	IMMUNOHISTOCHEMISTRY P63	1900	1900	1900
KLO25-3874	IMMUNOHISTOCHEMISTRY PANCREATIC NEOPLASM,TISSUE	7090	7090	7090
KLO25-3875	IMMUNOHISTOCHEMISTRY PAX 5 (BSAP)	2200	2200	2200
KLO25-3876	IMMUNOHISTOCHEMISTRY PAX 8	2300	2300	2300
KLO25-3877	IMMUNOHISTOCHEMISTRY PCEA	2200	2200	2200
KLO25-3878	IMMUNOHISTOCHEMISTRY PITIUARY LESION HORMONES, TISSUE	7000	7000	7000
KLO25-3879	IMMUNOHISTOCHEMISTRY PLAP	2200	2200	2200
KLO25-3880	IMMUNOHISTOCHEMISTRY POLYOMA BK VIRUS (SV40)	2300	2300	2300
KLO25-3881	IMMUNOHISTOCHEMISTRY PR ('PROGESTERONE RECEPTOR)	1600	1600	1600
KLO25-3882	IMMUNOHISTOCHEMISTRY PS2	1900	1900	1900
KLO25-3883	IMMUNOHISTOCHEMISTRY PSA	1900	1900	1900
KLO25-3884	IMMUNOHISTOCHEMISTRY PTEN	2200	2200	2200
KLO25-3885	IMMUNOHISTOCHEMISTRY ROS1	4500	4500	4500
KLO25-3886	IMMUNOHISTOCHEMISTRY S-100 PROTEIN	1900	1900	1900
KLO25-3887	IMMUNOHISTOCHEMISTRY SARCOMA TYPING PANEL	8250	8250	8250
KLO25-3888	IMMUNOHISTOCHEMISTRY SERUM AMYLOID ASSOCIATED (SAA)	2200	2200	2200
KLO25-3889	IMMUNOHISTOCHEMISTRY SINGLE MARKER	2200	2200	2200
KLO25-3890	IMMUNOHISTOCHEMISTRY SMA	2200	2200	2200
KLO25-3891	IMMUNOHISTOCHEMISTRY SYNAPTOPHYSIN BLOCK	1900	1900	1900
KLO25-3892	IMMUNOHISTOCHEMISTRY TdT	1900	1900	1900
KLO25-3893	IMMUNOHISTOCHEMISTRY THROMBOMODULIN	2200	2200	2200
KLO25-3894	IMMUNOHISTOCHEMISTRY TSH	2200	2200	2200
KLO25-3895	IMMUNOHISTOCHEMISTRY TTF - I	2300	2300	2300
KLO25-3896	IMMUNOHISTOCHEMISTRY V-9 (VIMENTIN)	1900	1900	1900
KLO25-3897	IMMUNOHISTOCHEMISTRY WT-1	2300	2300	2300
KLO25-3898	IMMUNOHISTOCHEMISTRY, ALKD5F3	4800	4800	4800
KLO25-3899	IMMUNOHISTOCHEMISTRY, INDIVIDUAL MARKER- HEPATOCYTE SPECIFIC ANTIGEN (HSA)	1900	1900	1900
KLO25-3900	IMMUNOHISTOCHEMISTRY, CARCINOMA VS LYMPHOMA PANEL *LCA*CK	3700	3700	3700
KLO25-3901	IMMUNOHISTOCHEMISTRY, DIFFUSE LARGE CELL LYMPHOMA PANEL	7700	7700	7700
KLO25-3902	IMMUNOHISTOCHEMISTRY, DIFFUSE SMALL CELL LYMPHOMA PANEL	7700	7700	7700
KLO25-3903	IMMUNOHISTOCHEMISTRY, DIGITAL BREAST CANCER PANEL-1	3800	3800	3800
KLO25-3904	IMMUNOHISTOCHEMISTRY, DIGITAL BREAST CANCER PANEL-3	5400	5400	5400
KLO25-3905	IMMUNOHISTOCHEMISTRY, DIGITAL BREAST CANCER PANEL-4	7600	7600	7600
KLO25-3906	IMMUNOHISTOCHEMISTRY, FOLLICULAR LYMPHOMA VS REACTIVE HYPERPLASIA PANEL	4900	4900	4900
KLO25-3907	IMMUNOHISTOCHEMISTRY, HODGKINS VS NON HODGKINS LYMPHOMA PANEL	7150	7150	7150
KLO25-3908	IMMUNOHISTOCHEMISTRY, INI-1	2300	2300	2300
KLO25-3909	IMMUNOHISTOCHEMISTRY, LH	2200	2200	2200
KLO25-3910	IMMUNOHISTOCHEMISTRY, MDM2	2200	2200	2200
KLO25-3911	IMMUNOHISTOCHEMISTRY, MICROSATELLITE INSTABILITY PANEL FOR COLORECTAL CANCER * MLH-1	9300	9300	9300
KLO25-3912	IMMUNOHISTOCHEMISTRY, MUM1	2200	2200	2200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3913	IMMUNOHISTOCHEMISTRY, PD-L1	5400	5400	5400
KLO25-3914	IMMUNOHISTOCHEMISTRY, PDL1 22C3 (DAKO)	15100	15100	15100
KLO25-3915	IMMUNOHISTOCHEMISTRY, PITUITARY ADENOMA PANEL	7000	7000	7000
KLO25-3916	IMMUNOHISTOCHEMISTRY, SOX10	2200	2200	2200
KLO25-3917	IMMUNOHISTOCHEMISTRY-C3	2200	2200	2200
KLO25-3918	IMMUNOHISTOCHEMISTRY-THYROGLOBULIN	2200	2200	2200
KLO25-3919	IMMUNOSUPERSSANT DRUG PROFILE-4	8900	8900	8900
KLO25-3920	IMMUNOSUPRESSANT DRUG PROFILE-1	8200	8200	8200
KLO25-3921	IMMUNOSUPRESSANT DRUG PROFILE-2	6800	6800	6800
KLO25-3922	IMMUNOSUPRESSANT DRUG PROFILE-3	6000	6000	6000
KLO25-3923	IMMUNOTYPING, SERUM	6700	6700	6700
KLO25-3924	INFECTIOUS MONONUCLEOSIS PANEL	5000	5000	5000
KLO25-3925	INFLAMMATORY BOWEL DISEASE PANEL	4830	4830	4830
KLO25-3926	INFLAMMATORY BOWEL DISEASE PANEL (IL10RA AND IL10RB GENES) (M)	30000	30000	30000
KLO25-3927	INFLIXIMAB ANTIBODY	26300	26300	26300
KLO25-3928	INFLIXIMAB ANTIBODY, ANTI TF BLOCKER	26300	26300	26300
KLO25-3929	INFLUENZA A & B ANTIGEN, QUALITATIVE	1380	1380	1380
KLO25-3930	INFLUENZA A & B IGG ANTIBODY, SERUM IFA	1500	1500	1500
KLO25-3931	INFLUENZA A & B IGM ANTIBODY, SERUM IFA	1700	1700	1700
KLO25-3932	INFLUENZA A -IgG	1850	1850	1850
KLO25-3933	INFLUENZA A- IgM	1850	1850	1850
KLO25-3934	INFLUENZA B -IgG	1850	1850	1850
KLO25-3935	INFLUENZA B- IgM	1850	1850	1850
KLO25-3936	INHIBIN A	1910	1910	1910
KLO25-3937	INHIBIN A (DIMERIC)	1200	1200	1200
KLO25-3938	INHIBIN A, REPRODUCTIVE MARKER	800	800	800
KLO25-3939	INHIBIN A.PREGNANCY (L)	800	800	800
KLO25-3940	INHIBIN MATERNAL SCREENING	800	800	800
KLO25-3941	INHIBIN-B	6390	6390	6390
KLO25-3942	INHIBIN-B LEVEL	2100	2100	2100
KLO25-3943	InsighT Plus (NIPS 10 Anueploidies + 63 Microdeletion) -L	25000	25000	25000
KLO25-3944	IN-SITU HYBRIDIZATION -EPSTEIN BARR VIRUS EARLY RNA (EBER-ISH)	4500	4500	4500
KLO25-3945	INSULIN AB HIGHLY SENSITIVE	11000	11000	11000
KLO25-3946	INSULIN ANTIBODIES	1990	1990	1990
KLO25-3947	INSULIN AUTOANTIBODIES (IA-2)-(M)	5400	5400	5400
KLO25-3948	INSULIN FREE	7150	7150	7150
KLO25-3949	INSULIN LIKE GROWTH FACTOR BINDING PROTEIN-1(IGF BP1)	9100	9100	9100
KLO25-3950	INTEFERON -BETA IGG MAID (REFLEX TO NEUTRILIZATION)	16900	16900	16900
KLO25-3951	INTERFERON BETA 1A (INFB-1A)AB	18860	18860	18860
KLO25-3952	INTERLEUKIN 1 BETA	12150	12150	12150
KLO25-3953	INTERLEUKIN 10	24250	24250	24250
KLO25-3954	INTERLEUKIN 2 RECEPTOR	27500	27500	27500
KLO25-3955	INTERLEUKIN 28B (IL28B RS12979860) GENOTYPING	5200	5200	5200
KLO25-3956	INTERLEUKIN -4	2000	2000	2000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-3957	INTERLEUKIN 5 (CYTOKINE)	3800	3800	3800
KLO25-3958	INTERLEUKIN 6(US)	14130	14130	14130
KLO25-3959	INTERLEUKIN -8	2000	2000	2000
KLO25-3960	INTESTINAL PERMEABILITY	8900	8900	8900
KLO25-3961	INTRINSIC FACTOR ANTIBODY, IIF	2600	2600	2600
KLO25-3962	INTRINSIC FACTOR BLOCKING ANTIBODY	6750	6750	6750
KLO25-3963	INTRINSIC FACTOR IgG	2600	2600	2600
KLO25-3964	INV 16 (P13Q22) / T(16;16)(P13;Q22) GENE REARRANGEMENT, PCR QUALITATIVE	4500	4500	4500
KLO25-3965	IODIINE, (NMS 2420)-USA	14850	14850	14850
KLO25-3966	IODINE, SERUM	3970	3970	3970
KLO25-3967	IODINE, Serum by ICP-MS method	9610	9610	9610
KLO25-3968	IODINE, Urine by ICP-MS method	9360	9360	9360
KLO25-3969	IODINE,24 HRS URINE	3970	3970	3970
KLO25-3970	ION MOBILITY LIPOPROTEIN FRACTION	3970	3970	3970
KLO25-3971	IRON, ATOMIC ABSORTION, 24 HOUR URINE	2800	2800	2800
KLO25-3972	ISLET CELL ANTIBODY IMMUNOFLUORESCENCE	2150	2150	2150
KLO25-3973	ISLET CELL ANTIBODY, IN DILUTIONS	3960	3960	3960
KLO25-3974	ISOELETRIC FOCUSING OF CSF, FOR OLIGOCLONAL BAND, CSF	5500	5500	5500
KLO25-3975	ISOLEUCINE SCREEN, SERUM	6760	6760	6760
KLO25-3976	ISOLEUCINE SCREEN, URINE	8760	8760	8760
KLO25-3977	Isospora by smear examination Stool	500	500	500
KLO25-3978	IT PENTA MARKER SCREENING (BS)	5000	5000	5000
KLO25-3979	JAK -2 QUALITATIVE PCR	5800	5800	5800
KLO25-3980	JAK-2 EXONS 12 & 13 MUTATION BY PCR	6800	6800	6800
KLO25-3981	JAK2 GENE ANALYSIS - 2 EXONS (12, 14) (M)	7000	7000	7000
KLO25-3982	JAK-2 MUTATION V617F	8000	8000	8000
KLO25-3983	JAK-2 MUTATION V617F , REFLEX TO JAK-2 (L)	8000	8000	8000
KLO25-3984	JAK-2 MUTATION V617F REFLEX TO JAK2 EX 12, PCR	12400	12400	12400
KLO25-3985	JAK2 V617F ALLELIC RATIO	10800	10800	10800
KLO25-3986	JAK2V617F, CALR & MPL MUTATION DETECTION PROFILE	12400	12400	12400
KLO25-3987	JAPANESE CEDAR (T17),IGE,SERUM	2630	2630	2630
KLO25-3988	JAPANESE ENCEPHALITIS VIRUS (JEV) , DETECTION PCR	3200	3200	3200
KLO25-3989	JAPANESE ENCEPHALITIS VIRUS ANTIBODY, IGG & IGM	37920	37920	37920
KLO25-3990	JAPANESE ENCEPHALITIS VIRUS ANTIBODY, IGM	2700	2700	2700
KLO25-3991	JAPANESE ENCEPHALITIS VIRUS -RT PCR	4300	4300	4300
KLO25-3992	JAPANESE MILET IGE,SERUM	2630	2630	2630
KLO25-3993	JC POLYOMA VIRUS , DNA QUALITATIVE. CSF	4500	4500	4500
KLO25-3994	JC VIRUS DNA, QUANTITATIVE, PCR	16820	16820	16820
KLO25-3995	JC VIRUS-DNA (JACOB CREUTZFIELD VIRUS), CSF	4600	4600	4600
KLO25-3996	JC VIRUS-DNA (JACOB CREUTZFIELD VIRUS), PCR	11300	11300	11300
KLO25-3997	JC VIRUS-DNA (JACOB CREUTZFIELD VIRUS), PLASMA	4800	4800	4800
KLO25-3998	JC VIRUS-DNA (JACOB CREUTZFIELD VIRUS), URINE	4600	4600	4600
KLO25-3999	JC/BK VIRUS DETECTION PCR	10200	10200	10200
KLO25-4000	JEV (JAPANESE ENCEPHALITIS) IGM ANTIBODY	2500	2500	2500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4001	JEV-RNA (JAPANESE ENCEPHALITIS VIRUS)-PCR	4300	4300	4300
KLO25-4002	JEV-RNA, BLOOD (JAPANESE ENCEPHALITIS VIRUS)	4300	4300	4300
KLO25-4003	JEV-RNA, CSF (JAPANESE ENCEPHALITIS VIRUS)	6000	6000	6000
KLO25-4004	JEV-RNA, PLASMA (JAPANESE ENCEPHALITIS VIRUS)	4300	4300	4300
KLO25-4005	JEV-RNA, SERUM (JAPANESE ENCEPHALITIS VIRUS)	4300	4300	4300
KLO25-4006	JMML RISK STRATIFICATION GENE PANEL (M)	36000	36000	36000
KLO25-4007	JO-1 ANTIBODY	1500	1500	1500
KLO25-4008	JOUBERT SYNDROME GENE PANEL (M)	20800	20800	20800
KLO25-4009	Kala azar	1800	1800	1800
KLO25-4010	KALLMANN SYNDROME GENE PANEL (M)	20800	20800	20800
KLO25-4011	KAPPA / LAMBDA LIGHT CHAINS, FREE, SERUM	7000	7000	7000
KLO25-4012	KAPPA / LAMBDA LIGHT CHAINS, FREE, URINE	7000	7000	7000
KLO25-4013	KAPPA LIGHT CHAINS, URINE 24 HOURS	4000	4000	4000
KLO25-4014	KAPPA/LAMBDA LIGHT CHAIN	7000	7000	7000
KLO25-4015	KARYO TRACK(SNP Based Chromosomal Microarray)	19000	19000	19000
KLO25-4016	KARYOSEQ WITH(Prenatal Cell Culture if Required)	12000	12000	12000
KLO25-4017	KARYOSEQ(Low Pass Whole Genome Sequencing Based Chromosomal Abnormality Detection) FOR PRENATAL S	12000	12000	12000
KLO25-4018	KARYOSEQ(With MCC)	13000	13000	13000
KLO25-4019	KARYOTYPIING FISH (5 PROBE), AMNIOTIC FLUID-PACKAGE(L)	13000	13000	13000
KLO25-4020	KARYOTYPIING FISH (5 PROBE), CVS-PACKAGE (L)	13000	13000	13000
KLO25-4021	KARYOTYPING + 22q11.2-PACKAGE-AMNIOTIC FLUID (L)	10000	10000	10000
KLO25-4022	KARYOTYPING + 22q11.2-PACKAGE-CVS (L)	10000	10000	10000
KLO25-4023	KARYOTYPING + CYTOPRIME MICROARRAY (G)	18000	18000	18000
KLO25-4024	KARYOTYPING + FISH (5 PROBES) + 22Q11.2-PACKAGE -AMNIOTIC FLUID	16000	16000	16000
KLO25-4025	KARYOTYPING + FISH (5 PROBES) + 22Q11.2-PACKAGE -CVS (L)	16000	16000	16000
KLO25-4026	KARYOTYPING ON AMNIOTIC FLUID (L)	6500	6500	6500
KLO25-4027	KARYOTYPING ON BONE MARROW	2800	2800	2800
KLO25-4028	KARYOTYPING ON CVS. (L)	6500	6500	6500
KLO25-4029	KARYOTYPING ON FETAL BLOOD	3250	3250	3250
KLO25-4030	KARYOTYPING ON FETAL BLOOD HIGH RESOLUTION BANDING	4500	4500	4500
KLO25-4031	KARYOTYPING ON POST NATAL CORD BLOOD	2500	2500	2500
KLO25-4032	KARYOTYPING ON PRODUCT OF CONCEPTION	3100	3100	3100
KLO25-4033	KARYOTYPING ON VENOUS BLOOD	2500	2500	2500
KLO25-4034	KARYOTYPING ON VENOUS BLOOD WITH HIGH RESOLUTION BANDING	4300	4300	4300
KLO25-4035	KARYOTYPING -PB/CORD BLOOD (L)	6000	6000	6000
KLO25-4036	KARYOTYPING -PERIPHERAL BLOOD (L)	3500	3500	3500
KLO25-4037	KARYOTYPING WITH HIGH RESOLUTION BANDING & FISH FOR MILLWE DIEKER ON VENOUS BLOOD	9800	9800	9800
KLO25-4038	KCT-KAOLIN CLOTTING TIME	1390	1390	1390
KLO25-4039	KENNEDY DISEASE	7390	7390	7390
KLO25-4040	KETOCONAZOLE,LEVEL BA	19870	19870	19870
KLO25-4041	KIDNEY BIOPSY-ELECTRON MICROSCOPY	13000	13000	13000
KLO25-4042	KIR GENOTYPING	10800	10800	10800
KLO25-4043	KIT GENE ANALYSIS - 2 EXONS (9,11) (M)	9300	9300	9300
KLO25-4044	KIT GENE ANALYSIS - 4 EXONS (9, 11, 13, 17) (M)	12000	12000	12000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4045	KLEUKEMIA DIAGNOSTIC PANEL, PLASMA CELL DYSCRASIS	7900	7900	7900
KLO25-4046	KLIPPEL-FEIL SYNDROME GENE PANEL (M)	25000	25000	25000
KLO25-4047	KRABBE DISEASE (GALC) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-4048	KRABBE DISEASE (GALC) GENE ANALYSIS (M)	16000	16000	16000
KLO25-4049	KRAS & NRAS MUTATION ANALYSIS PANEL	11900	11900	11900
KLO25-4050	KRAS CODON 61 MUTATION DETECTION	7500	7500	7500
KLO25-4051	KRAS GENE ANALYSIS - 2 EXONS (2 & 3) (M)	6500	6500	6500
KLO25-4052	KRAS GENE ANALYSIS (HOT SPOT) (M)	6000	6000	6000
KLO25-4053	K-RAS MUTATION,	8100	8100	8100
KLO25-4054	KRAS MUTATION, CODINI 12 & 13 FRAGMENT ANALYSIS	8100	8100	8100
KLO25-4055	K-RAS MUTATION,ANALYSIS	11900	11900	11900
KLO25-4056	LA ANTIBODY (SSB-SOLUBLE SUBSTANCE B) ANTIBODY, SERUM EIA	1550	1550	1550
KLO25-4057	LACOSAMIDE, SERUM/PLASMA	6750	6750	6750
KLO25-4058	LACTOFERRIN,QUANTITATIVE STOOL	19580	19580	19580
KLO25-4059	LAMBDA LIGHT CHAINS, URINE 24H	3270	3270	3270
KLO25-4060	LAMOTRIGINE	7000	7000	7000
KLO25-4061	LAMOTRIGINE.LEVEL	4910	4910	4910
KLO25-4062	LAP SCORE (L)	1220	1220	1220
KLO25-4063	LASA	6290	6290	6290
KLO25-4064	LATS-LONG ACTING THYROID STIMULATING HORMONE (TSI-TSH RECEPTOR), SERUM	3900	3900	3900
KLO25-4065	LC-1 (LIVER CYTOSOLIC ANTIGEN TYPE-1)ANTIBODY, SERUM	3050	3050	3050
KLO25-4066	LD (LEIGH'S DISEASE), BLOOD-PCR	15080	15080	15080
KLO25-4067	LD BODIES , LEISHMANIA DODOVANI BODIES	1800	1800	1800
KLO25-4068	LD LEIGHS DIESEASE	15080	15080	15080
KLO25-4069	LDL SUBFRACTIONS	5000	5000	5000
KLO25-4070	LEAD 24 HOUR URINE	1800	1800	1800
KLO25-4071	LEAD BLOOD (PB+)	1800	1800	1800
KLO25-4072	LEAD POISIONING/PORPHYRIA PROFILE URINE	9950	9950	9950
KLO25-4073	LEAD POISONING PANEL *5-ALA * LEAD BLOOD	5900	5900	5900
KLO25-4074	LEAD POISONING TESTS (PORPHYRIA PROFILE), URINE	5900	5900	5900
KLO25-4075	LEAD RANDOM URINE	1800	1800	1800
KLO25-4076	LEAD, UIRINE SPOT	1960	1960	1960
KLO25-4077	LEBER CONGENITAL AMAUROSIS GENE PANEL (M)	33000	33000	33000
KLO25-4078	LEBER'S HEREDITARY OPTIC NEUROPATHY (LHON) MITOCHONDRIAL MUTATION DETECTION	5500	5500	5500
KLO25-4079	LECT2	1800	1800	1800
KLO25-4080	LEGIONELLA PNEUMOPHILA ANTIBODY, SERUM, IFA	25300	25300	25300
KLO25-4081	LEGIONELLA ANTIGEN , URINE	2700	2700	2700
KLO25-4082	LEGIONELLA ANTIGEN , URINE(US)	11100	11100	11100
KLO25-4083	LEGIONELLA PNEUMOPHILA ANTIBODY IGG/IGM-SEROGROUP	11900	11900	11900
KLO25-4084	LEGIONELLA PNEUMOPHILA ANTIGEN DETECTION, URINE.	2800	2800	2800
KLO25-4085	LEGIONELLA PNEUMOPHILA ANTIGEN, URINE	11100	11100	11100
KLO25-4086	LEGIONELLA PNEUMOPHILA IgM	2500	2500	2500
KLO25-4087	LEGIONELLA PNEUMOPHILA, IgG	2520	2520	2520
KLO25-4088	LEGIONELLA PNEUMOPHILLIA IgM ANTIBODIES	4600	4600	4600

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4089	LEGIONELLA URINARY ANTIGEN EIA	5640	5640	5640
KLO25-4090	LEGUME MIX FX32-PANEL	2500	2500	2500
KLO25-4091	LEIGH SYNDROME & MITOCHONDRIAL (BS)	43200	43200	43200
KLO25-4092	LEIGH SYNDROME & MITOCHONDRIAL ENCEPHALOPATHY GENE PANEL (M)	25000	25000	25000
KLO25-4093	LEIGH SYNDROME MITOCHONDRIAL MUTATION DETECTION	5500	5500	5500
KLO25-4094	LEISHMANIA (KALA AZAR) RK-39 ANTIBODY, SERUM	700	700	700
KLO25-4095	LEISHMANIA ANTIBODY (KALA AZAR) IGG	1800	1800	1800
KLO25-4096	LEP GENE (LEPTIN) DEL / DUP (FOR CONGENITAL LEPTIN DEFICIENCY) (M)	20000	20000	20000
KLO25-4097	LEP GENE (LEPTIN) SEQUENCING (FOR CONGENITAL LEPTIN DEFICIENCY) (M)	30000	30000	30000
KLO25-4098	LEPTIN	4200	4200	4200
KLO25-4099	LEPTOCHEQ	2000	2000	2000
KLO25-4100	LEPTOSPIRA -DNA DETECTION, PCR URINE	2500	2500	2500
KLO25-4101	LEPTOSPIROSIS-DNA DETECTION, BLOOD	2500	2500	2500
KLO25-4102	LEUCINE QUANTITATIVE	6760	6760	6760
KLO25-4103	LEUCINE QUANTITATIVE, 24 HOURS URINE	6760	6760	6760
KLO25-4104	LEUCOCYTE ADHESION DEFICIENCY (LAD I & II)	4300	4300	4300
KLO25-4105	LEUCOCYTE ALKALINE PHOSPHATE SCORE LAP SCORE	1200	1200	1200
KLO25-4106	LEUKEMIA - AML CATEGORIZATION BY PCR	11600	11600	11600
KLO25-4107	LEUKEMIA , ALL PANEL	15100	15100	15100
KLO25-4108	LEUKEMIA / LYMPHOMA DIAGNOSTIC PANEL: CHRONIC LYMPHOPROLIFERATIVE DISORDERS:	16200	16200	16200
KLO25-4109	LEUKEMIA CLL PANEL	11000	11000	11000
KLO25-4110	LEUKEMIA COMPREHENSIVE WORKUP PANEL	27000	27000	27000
KLO25-4111	LEUKEMIA DIAGNOSTIC COMPREHENSIVE PROFILE 1	18000	18000	18000
KLO25-4112	LEUKEMIA DIAGNOSTIC COMPREHENSIVE PROFILE 2	16000	16000	16000
KLO25-4113	LEUKEMIA DIAGNOSTIC COMPREHENSIVE PROFILE 3	13000	13000	13000
KLO25-4114	LEUKEMIA DIAGNOSTIC COMPREHENSIVE PROFILE 4	11000	11000	11000
KLO25-4115	LEUKEMIA DIAGNOSTIC COMPREHENSIVE PROFILE 5	8500	8500	8500
KLO25-4116	LEUKEMIA DIAGNOSTIC COMPREHENSIVE PROFILE 6	6600	6600	6600
KLO25-4117	LEUKEMIA DIAGNOSTIC COMPREHENSIVE PROFILE 7	15000	15000	15000
KLO25-4118	LEUKEMIA DIAGNOSTIC PANEL - ALL CHARACTERIZATION	7000	7000	7000
KLO25-4119	LEUKEMIA DIAGNOSTIC PANEL ACUTE LEUKEMIA	12100	12100	12100
KLO25-4120	LEUKEMIA DIAGNOSTIC PANEL ACUTE LEUKEMIA T,B OR MYELOID	9700	9700	9700
KLO25-4121	LEUKEMIA DIAGNOSTIC PANEL AML CHARACTERIZATION	11600	11600	11600
KLO25-4122	LEUKEMIA DIAGNOSTIC PANEL CLL/HCL/SLL BASIC	9700	9700	9700
KLO25-4123	LEUKEMIA DIAGNOSTIC PANEL CUSTOM (ANY 5 MARKER)	7500	7500	7500
KLO25-4124	LEUKEMIA DIAGNOSTIC PANEL T-CELL	7330	7330	7330
KLO25-4125	LEUKEMIA DIAGNOSTIC PANEL, CUSTOMIZED (ANY 10 MARKERS)	10000	10000	10000
KLO25-4126	LEUKEMIA DIAGNOSTIC PANEL, CUSTOMIZED (ANY 6 MARKER)	16200	16200	16200
KLO25-4127	LEUKEMIA GENETIC PROFILE-ANY SIX MARKER-PCR	7100	7100	7100
KLO25-4128	LEUKEMIA MONITORING PANEL, HAIRY CELL	10000	10000	10000
KLO25-4129	LEUKEMIA MYELOMA PANEL	8000	8000	8000
KLO25-4130	LEUKEMIA, CLL PANEL	11000	11000	11000
KLO25-4131	LEUKEMIA: CUSTOMISED PANEL, BLOOD	9300	9300	9300
KLO25-4132	LEUKEMIA: CUSTOMISED PANEL, BONE MARROW	8000	8000	8000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4133	LEUKEMINA CHARACTERIZATION - ALL IMMUNOPHENOTYPING	19800	19800	19800
KLO25-4134	LEUKEMINA CHARACTERIZATION - AML IMMUNOPHENOTYPING	25000	25000	25000
KLO25-4135	LEUKEMINA CHARACTERIZATION - CLPD IMMUNOPHENOTYPING	19800	19800	19800
KLO25-4136	LEUKODYSTROPHY GENE PANEL (M)	17000	17000	17000
KLO25-4137	LEVETIRACETAM	12000	12000	12000
KLO25-4138	LEVETIRACETAM.-(M)	6540	6540	6540
KLO25-4139	LGL PANEL	11300	11300	11300
KLO25-4140	LHON (LEBER'S HEREDITARY OPTIC NEUROPATHY), BLOOD	16640	16640	16640
KLO25-4141	LIDOCAINE (XYLOCAINE, LIGNOCAINE, GESICARD)	1300	1300	1300
KLO25-4142	LIMB-GIRDLE MUSCULAR DYSTROPHY DELETION/DUPLICATION ANALYSIS (SGCA, SGCB,SGCD, SGCG & FK	8000	8000	8000
KLO25-4143	LIPID PROFILE WITH LDL SUBFRACTION	7110	7110	7110
KLO25-4144	LIPOPROTEIN ELECTROPHORESIS	2500	2500	2500
KLO25-4145	LIPOPROTEIN FRACTIONAL, ULTRACENTRIFUGATION	15400	15400	15400
KLO25-4146	LIPOPROTEIN,LP(a)	1000	1000	1000
KLO25-4147	LIQUID BIOPSY, CFDNA, EGFR	13500	13500	13500
KLO25-4148	LIQUID BIOPSY, ctDNA, EGFR	13500	13500	13500
KLO25-4149	LISSENCEPHALY GENE PANEL (M)	17500	17500	17500
KLO25-4150	Lissencephaly Panel By MLPA	12000	12000	12000
KLO25-4151	LISTERIA ANTIGEN, STOOL	1580	1580	1580
KLO25-4152	LITHIUM (ISE)	330	330	330
KLO25-4153	LIVER BIOPSY WITH SPECIAL STAIN	2920	2920	2920
KLO25-4154	LIVER FIBROSIS PANEL	1650	1650	1650
KLO25-4155	LIVER KIDNEY MICROSOMAL ANTIBODY IN DILUTION LKM ANTIBODY	3100	3100	3100
KLO25-4156	LIVORHYTHM - 2	5000	5000	5000
KLO25-4157	LIVORHYTHM - 4	6900	6900	6900
KLO25-4158	LKM - ANTIBODY(LIVER KIDNEY MICROSOMAL AB) IIF	1600	1600	1600
KLO25-4159	LOW GRADE GLIOMA PANEL	18400	18400	18400
KLO25-4160	LpL-(1, 3)-BETA-D-GLUCAN (BDG), CL	11000	11000	11000
KLO25-4161	LpL-(HSV)2ANTIBPANELIGG&IGM	1400	1400	1400
KLO25-4162	LpL-10 DRUG PANEL	6850	6850	6850
KLO25-4163	LpL-11 DRUG PANEL (A)	7850	7850	7850
KLO25-4164	LpL-12 GENE LUNG CANCER PANEL WITH	32400	32400	32400
KLO25-4165	LpL-17HYDROXYPROGESTERON (A)	1400	1400	1400
KLO25-4166	LpL-3-HYDROXY-3-METHYLGLUTARYL-COA	3500	3500	3500
KLO25-4167	LpL-5 DRUG PANEL	3600	3600	3600
KLO25-4168	LpL-5 DRUG PANEL - EVALUTIZATION	3600	3600	3600
KLO25-4169	LpL-5 DRUGS PANEL, DRUGS OF ABUSE	1200	1200	1200
KLO25-4170	LpL-5 FLUOROURACIL TOXICITY (DPD G	7600	7600	7600
KLO25-4171	LpL-5ALPHADIHYDROTESTOSTERONE5ALPH	2900	2900	2900
KLO25-4172	LpL-5C DRUG PANEL	3420	3420	3420
KLO25-4173	LpL-7 DRUG PANEL	4750	4750	4750
KLO25-4174	LpL-7 DRUG PANEL (A)	5100	5100	5100
KLO25-4175	LpL-7 DRUGS PANEL, DRUGS OF ABUSE,	1700	1700	1700
KLO25-4176	LpL-8 DRUG PANEL	5450	5450	5450

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4177	LpL-9 DRUG PANEL	6600	6600	6600
KLO25-4178	LpL-9 DRUGS PANEL, DRUGS OF ABUSE	5900	5900	5900
KLO25-4179	LpL-ABORTIONPANEL	17500	17500	17500
KLO25-4180	LpL-ACCUTYPE® CP, CLOPIDOGREL CYP2	38300	38300	38300
KLO25-4181	LpL-ACETONESERUM(Quantitative)	550	550	550
KLO25-4182	LpL-ACTN3(SPORTSGENE)GENOTYPING	6700	6700	6700
KLO25-4183	LpL-ACUTE LEUKEMIA DIAGNOSTIC COMP	27000	27000	27000
KLO25-4184	LpL-ACUTE LYMPHOBLASTIC LEUKEMIA (	15100	15100	15100
KLO25-4185	LpL-ACUTE MYELOID LEUKEMIA (AML) C	18900	18900	18900
KLO25-4186	LpL-ACUTEKIDNEYINJURYPANEL	8650	8650	8650
KLO25-4187	LpL-ADHANTIDIURETICHORMONE(VASOPRE	5200	5200	5200
KLO25-4188	LpL-ADRENAL ANTIBODY SCREEN WITH R	13000	13000	13000
KLO25-4189	LpL-ALLERGIC BRONCHOPULMONARY ASPE	3200	3200	3200
KLO25-4190	LpL-AML CATEGORIZATION, PCR	8600	8600	8600
KLO25-4191	LpL-AML ETO T(8;21) GENE REARRANGE	5600	5600	5600
KLO25-4192	LpL-AMLETOT(821)GENEREARRANGEMENTP	3850	3850	3850
KLO25-4193	LpL-AMLETOT(821)GENEREARRANGEMENTP (A)	4500	4500	4500
KLO25-4194	LpL-AMYLOID PROTEIN IDENTIFICATION	223200	223200	223200
KLO25-4195	LpL-ANA PLUS	4700	4700	4700
KLO25-4196	LpL-ANA REFLEX WITH ENA 18 ANTIGEN	4800	4800	4800
KLO25-4197	LpL-ANA REFLEX WITH ENA 23 ANTIGEN	5400	5400	5400
KLO25-4198	LpL-ANALYZER 18; SMA 18 TEST PANEL	1500	1500	1500
KLO25-4199	LpL-ANALYZER 26; SMA 26 TEST PANEL	2000	2000	2000
KLO25-4200	LpL-APOEGENOTYPING	32400	32400	32400
KLO25-4201	LpL-AUTO IMMUNE ENCEPHALITIS PANEL	36700	36700	36700
KLO25-4202	LpL-AUTOGEN PANEL	9200	9200	9200
KLO25-4203	LpL-AUTOGEN PLUS PANEL	10800	10800	10800
KLO25-4204	LpL-AUTOIMMUNE BULLOUS DERMATOSES	9600	9600	9600
KLO25-4205	LpL-AUTOIMMUNE BULLOUS DERMATOSES (A)	13000	13000	13000
KLO25-4206	LpL-AUTOIMMUNE BULLOUS DERMATOSES (B)	10800	10800	10800
KLO25-4207	LpL-AUTOIMMUNE LIVER DISEASES PROF	8700	8700	8700
KLO25-4208	LpL-BACTERIALPNEUMONAIPANEL(MYCOPL	7800	7800	7800
KLO25-4209	LpL-BARTONELLA ANTIBODY PANEL, IGG	9440	9440	9440
KLO25-4210	LpL-BASIC TRANSPLANT VIRAL INFECTI	12000	12000	12000
KLO25-4211	LpL-BCR::ABL1 QUANTITATIVE, MRD MO	6500	6500	6500
KLO25-4212	LpL-BCR-ABL GENE REARRANGEMENT, PC	3300	3300	3300
KLO25-4213	LpL-BCR-ABL GENE REARRANGEMENT, PC (A)	6500	6500	6500
KLO25-4214	LpL-BCR-ABL QUANTITATIVE, MRD MONI	6500	6500	6500
KLO25-4215	LpL-BCRABLQUALITATIVEPCR	3000	3000	3000
KLO25-4216	LpL-BETA2GLYCOPROT1PANEL	2800	2800	2800
KLO25-4217	LpL-BETACATENIN	2300	2300	2300
KLO25-4218	LpL-BKVIRUSPCRQUANTITATIVE	5700	5700	5700
KLO25-4219	LpL-BRAF	6200	6200	6200
KLO25-4220	LpL-BRCA1 & BRCA2 MUTATION ADVANCE	23800	23800	23800

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4221	LpL-BRCA1 & BRCA2 MUTATION DRUG PR	23800	23800	23800
KLO25-4222	LpL-BRCA1 & BRCA2 MUTATION; ADVANC	23800	23800	23800
KLO25-4223	LpL-BRCA1 & BRCA2 MUTATION; DRUG P	23800	23800	23800
KLO25-4224	LpL-BREAST CANCER PANEL 2 * ER * P	4400	4400	4400
KLO25-4225	LpL-BREAST CANCER PANEL 3	4600	4600	4600
KLO25-4226	LpL-BREAST CANCER PANEL-4	6800	6800	6800
KLO25-4227	LpL-BREAST METASTATIC MARKER * ER	4000	4000	4000
KLO25-4228	LpL-BREASTMONITORPANEL*C	2200	2200	2200
KLO25-4229	LpL-BROMIDE TOTAL	8800	8800	8800
KLO25-4230	LpL-BRUCELLA AGGLUTINATION TEST	800	800	800
KLO25-4231	LpL-BUCCALSMEARFORBARRBO	440	440	440
KLO25-4232	LpL-CALDESMON	2300	2300	2300
KLO25-4233	LpL-CALRMUTATIONDETECTION	4900	4900	4900
KLO25-4234	LpL-CANCER BREAST COMPREHENSIVE PA	7600	7600	7600
KLO25-4235	LpL-CANCER GENE ANY 3 MARKERS, NGS	14600	14600	14600
KLO25-4236	LpL-CANCER TARGETED GENE PANEL : L	29700	29700	29700
KLO25-4237	LpL-CANCER TARGETED GENE PANEL, CN	21600	21600	21600
KLO25-4238	LpL-CANCER TARGETED GENE PANEL, CO	16200	16200	16200
KLO25-4239	LpL-CANCER TARGETED GENE PANEL, GA	21600	21600	21600
KLO25-4240	LpL-CANCER TARGETED GENE PANEL-LU	21600	21600	21600
KLO25-4241	LpL-CANCER50GENEPANEL	32400	32400	32400
KLO25-4242	LpL-CARDIO IQ LIPOPROTEIN FRACTION	5400	5400	5400
KLO25-4243	LpL-CARDIOLIPINANTIBODIE	2600	2600	2600
KLO25-4244	LpL-CARRIER SCREENING (420 GENES)	22000	22000	22000
KLO25-4245	LpL-CEBPAMUTATIONDETECTIONBYPCR	10000	10000	10000
KLO25-4246	LpL-CERVICALSCREEN	1700	1700	1700
KLO25-4247	LpL-CHIMERISM SPLIT CELL ANALYSIS	8600	8600	8600
KLO25-4248	LpL-CHIMERISM SPLIT CELL ANALYSIS (A)	8600	8600	8600
KLO25-4249	LpL-CHIMERISMSPLITCELLANALYSIS	8600	8600	8600
KLO25-4250	LpL-CHLAMYDIATRACOMATISANDNEISSERI	5100	5100	5100
KLO25-4251	LpL-CHRONIC LYMPHOCYTIC LEUKEMIA	3800	3800	3800
KLO25-4252	LpL-CHRONIC LYMPHOCYTIC LEUKEMIA (	19400	19400	19400
KLO25-4253	LpL-CHRONIC LYMPHOCYTIC LEUKEMIA (A)	6500	6500	6500
KLO25-4254	LpL-CHRONICFATUGUESYNDROME	3800	3800	3800
KLO25-4255	LpL-CHRONICFATUGUESYNDROME(SUPPLEM	3000	3000	3000
KLO25-4256	LpL-CHRONICLYMPHOCYTICLEUKEMIA(CLL	3800	3800	3800
KLO25-4257	LpL-CKITMUTATIONDETECTIONBYPCR	6700	6700	6700
KLO25-4258	LpL-CMYC	2300	2300	2300
KLO25-4259	LpL-COLLAGEN DISEASE ANTIBODIES PA	9700	9700	9700
KLO25-4260	LpL-COMPLEMENT TOTAL (CH50)	3700	3700	3700
KLO25-4261	LpL-COMPREHENSIVE VIRAL DNA SCREEN	17000	17000	17000
KLO25-4262	LpL-COPPER, RBC	4300	4300	4300
KLO25-4263	LpL-CYP2C19GENOTYPINGBYPCRSEQUENCI	9000	9000	9000
KLO25-4264	LpL-CYP3A4*22GENOTYPINGBYPCRSEQUEN	7400	7400	7400

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4265	LpL-DNA PROFILING FOR ESTABLISHING	10000	10000	10000
KLO25-4266	LpL-DNA PROFILING/FINGER PRINTING	10800	10800	10800
KLO25-4267	LpL-DOG1(DISCOVEREDONGIST1)	1900	1900	1900
KLO25-4268	LpL-DONOR DERIVED CELL FREE DNA ;	27000	27000	27000
KLO25-4269	LpL-DOUBLE NEGATIVE T CELLS (DNT)	4300	4300	4300
KLO25-4270	LpL-DRPLA (DENTATORUBRAL-PALLIDOLU	5900	5900	5900
KLO25-4271	LpL-DRUGS OF ABUSE SCREEN, URINE 6	2800	2800	2800
KLO25-4272	LpL-EBEREPSTEINBARRVIRUSEARLYRNA	4500	4500	4500
KLO25-4273	LpL-EGFR (EXONS 18-21) MUTATION DE	10800	10800	10800
KLO25-4274	LpL-ELF(ENHANCEDLIVERFIBROSIS)TEST	4900	4900	4900
KLO25-4275	LpL-ENDOMETRIOSIS PANEL	3100	3100	3100
KLO25-4276	LpL-EPISODIC ATAXIA COMPREHENSIVE	13000	13000	13000
KLO25-4277	LpL-EPISODIC ATAXIA TYPE 1, KCNA1	9200	9200	9200
KLO25-4278	LpL-EPISODIC ATAXIA TYPE 2, CACNA1	9200	9200	9200
KLO25-4279	LpL-EPSTEINBARRVIRUSANTI	24400	24400	24400
KLO25-4280	LpL-EPSTEINBARRVIRUSANTI (A)	6000	6000	6000
KLO25-4281	LpL-ESTRADIOL, FREE	13700	13700	13700
KLO25-4282	LpL-FIBROBLASTGROWTHFACTOR(FGF2)	19000	19000	19000
KLO25-4283	LpL-FIBROMYALGIAPANEL	6000	6000	6000
KLO25-4284	LpL-FIP1L1PGDFRAGENEREARRANGEMENTD	9000	9000	9000
KLO25-4285	LpL-FISH- MYELOPROLIFERATIVE NEOPL	7600	7600	7600
KLO25-4286	LpL-FISH-ACUTE LYMPHOBLASTIC LEUKE	18700	18700	18700
KLO25-4287	LpL-FISH-AML MDS THERAPY RELATED	7700	7700	7700
KLO25-4288	LpL-FISH-NTRK 1,2 & 3 GENE PANEL	16200	16200	16200
KLO25-4289	LpL-FLOW CYTOMETRY, CD 1A	2200	2200	2200
KLO25-4290	LpL-FLOW CYTOMETRY, 'CD 45/ LCA (L	2200	2200	2200
KLO25-4291	LpL-FLOW CYTOMETRY, IGG HEAVY CHAI	2300	2300	2300
KLO25-4292	LpL-FLOW CYTOMETRY, IGG HEAVY CHAI (A)	2300	2300	2300
KLO25-4293	LpL-FLOW CYTOMETRY, 'IGM HEAVY CHA	2200	2200	2200
KLO25-4294	LpL-FLOW CYTOMETRY, IGM HEAVY CHAI	2300	2300	2300
KLO25-4295	LpL-FLOW CYTOMETRY, 'KAPPA & LAMBD	4200	4200	4200
KLO25-4296	LpL-FLOW CYTOMETRY, ZAP-70	2200	2200	2200
KLO25-4297	LpL-FLOW CYTOMETRY,CD 36	2300	2300	2300
KLO25-4298	LpL-FlowCytometry'CD10CA	2200	2200	2200
KLO25-4299	LpL-FlowCytometryCD117(M	2200	2200	2200
KLO25-4300	LpL-FlowCytometry'CD11c(	2300	2300	2300
KLO25-4301	LpL-FlowCytometry"CD13(	2300	2300	2300
KLO25-4302	LpL-FlowCytometryCD138(Plasmacellm	2200	2200	2200
KLO25-4303	LpL-FlowCytometry"CD14(	2200	2200	2200
KLO25-4304	LpL-FlowCytometry'CD15(M	2200	2200	2200
KLO25-4305	LpL-FlowCytometry"CD19(	2200	2200	2200
KLO25-4306	LpL-FlowCytometry'CD2(Pa	2200	2200	2200
KLO25-4307	LpL-FlowCytometry"CD20(	2200	2200	2200
KLO25-4308	LpL-FlowCytometry'CD22(P	2200	2200	2200

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4309	LpL-FlowCytometry"CD23(	2200	2200	2200
KLO25-4310	LpL-FlowCytometryCD25(Ha	2200	2200	2200
KLO25-4311	LpL-FlowCytometry'CD3(Pa	2200	2200	2200
KLO25-4312	LpL-FlowCytometryCD33(My	2200	2200	2200
KLO25-4313	LpL-FlowCytometryCD34(Pr	2500	2500	2500
KLO25-4314	LpL-FlowCytometry'CD38(P	2200	2200	2200
KLO25-4315	LpL-FlowCytometry'CD42a(	2300	2300	2300
KLO25-4316	LpL-FlowCytometry"CD5(T	2200	2200	2200
KLO25-4317	LpL-FlowCytometry'CD61(M	2200	2200	2200
KLO25-4318	LpL-FlowCytometry'CD7(Pa	2300	2300	2300
KLO25-4319	LpL-FlowCytometry'CD79a(	2300	2300	2300
KLO25-4320	LpL-FlowCytometryCD79b(BLymphoidce	2200	2200	2200
KLO25-4321	LpL-FlowCytometry'CDMPO(	2200	2200	2200
KLO25-4322	LpL-FlowCytometryFMC7(Pr	2200	2200	2200
KLO25-4323	LpL-FlowCytometry'Glycop	2200	2200	2200
KLO25-4324	LpL-FlowCytometry'HLADR(	2300	2300	2300
KLO25-4325	LpL-FLT3 GENE MUTATION QUANTITATIV	3500	3500	3500
KLO25-4326	LpL-FLT3GENEMUTATION	2920	2920	2920
KLO25-4327	LpL-FLT3GENEMUTATION (A)	3500	3500	3500
KLO25-4328	LpL-FOUNDATIONONE CDX (F1CDX	270000	270000	270000
KLO25-4329	LpL-FOUNDATIONONE LIQUIDCDX (F1LCD	270000	270000	270000
KLO25-4330	LpL-FREIDREICHSATAXIAMUTATIONANALY	9000	9000	9000
KLO25-4331	LpL-G6PDGENEMUTATIONDETECTIONBYPCR	5600	5600	5600
KLO25-4332	LpL-GALACTOSEMIA(GALT)GENEMUTATION	12000	12000	12000
KLO25-4333	LpL-GENETICMAPPINGFORONCOLOGY	18400	18400	18400
KLO25-4334	LpL-GENETICMAPPINGFORWHOLEGENOME	32400	32400	32400
KLO25-4335	LpL-GENODERMATOSES EXOME SEQUENCIN	23500	23500	23500
KLO25-4336	LpL-GENO-TB--DRT(GENOMIC TB DRUG R	7500	7500	7500
KLO25-4337	LpL-GLIOMA PROGNOSTIC PANEL	17300	17300	17300
KLO25-4338	LpL-GLUCAGON	7700	7700	7700
KLO25-4339	LpL-GLUCAGONSTIMULATIONT	4200	4200	4200
KLO25-4340	LpL-GLYPICAN3	2300	2300	2300
KLO25-4341	LpL-HISTOPATHLOLOGYBIOPSYBONE	1500	1500	1500
KLO25-4342	LpL-HISTOPATHOLOGY FINAL DIAGNOSIS	8600	8600	8600
KLO25-4343	LpL-HISTOPATHOLOGYBIOPSYLARGECOMPL	4500	4500	4500
KLO25-4344	LpL-HISTOPATHOLOGYDIRECTIMMUNOFLUO	3700	3700	3700
KLO25-4345	LpL-HISTOPATHOLOGYKIDNEYBIOPSYPANE	10900	10900	10900
KLO25-4346	LpL-HISTOPATHOLOGYKIDNEYBIOPSYPANE (A)	4400	4400	4400
KLO25-4347	LpL-HISTOPATHOLOGYKIDNEYBIOPSYPANE (B)	2100	2100	2100
KLO25-4348	LpL-HISTOPATHOLOGYKIDNEYBIOPSYSECO	1000	1000	1000
KLO25-4349	LpL-HISTOPATHOLOGYLIVERBIOPSYPANEL	2000	2000	2000
KLO25-4350	LpL-HISTOPATHOLOGYPOLARI	440	440	440
KLO25-4351	LpL-HISTOPATHSKINBIOPSYPANEL	1400	1400	1400
KLO25-4352	LpL-HLA - AB (CLASS 1) TYPING	8000	8000	8000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4353	LpL-HLA - B 38	4600	4600	4600
KLO25-4354	LpL-HLA - B15	4600	4600	4600
KLO25-4355	LpL-HLA - B5 (51 / 52)	4600	4600	4600
KLO25-4356	LpL-HLA - DR (CLASS II) TYPING	8000	8000	8000
KLO25-4357	LpL-HLA - DR2 (DRB1*02)	4600	4600	4600
KLO25-4358	LpL-HLA - DR3 (DRB1*03)	4600	4600	4600
KLO25-4359	LpL-HLA - DR4 (DRB1*04)	4600	4600	4600
KLO25-4360	LpL-HLA - DR5 (DRB1*05)	4600	4600	4600
KLO25-4361	LpL-HLA - DR7 ((DRB1*07)	4600	4600	4600
KLO25-4362	LpL-HLA - DSA (DONOR SPECIFIC IgG	5400	5400	5400
KLO25-4363	LpL-HLA - PANEL REACTIVE IgG ANT	11300	11300	11300
KLO25-4364	LpL-HLA - PANEL REACTIVE IgG ANT (A)	11300	11300	11300
KLO25-4365	LpL-HLA - PANEL REACTIVE IgG ANTI	6300	6300	6300
KLO25-4366	LpL-HLA B27	2400	2400	2400
KLO25-4367	LpL-HLA CELIAC DISEASE (DQB1*02,	6200	6200	6200
KLO25-4368	LpL-HLA DNA TYPING HIGH RESOLUTION	14000	14000	14000
KLO25-4369	LpL-HLA MIXED ANTIBODY SCREEN - PR	8600	8600	8600
KLO25-4370	LpL-HLA PRE-TRANSPLANT WORKUP PANE	22100	22100	22100
KLO25-4371	LpL-HLA PRE-TRANSPLANT WORKUP SENS	63400	63400	63400
KLO25-4372	LpL-HLA PRE-TRANSPLANT WORKUP SENS (A)	17600	17600	17600
KLO25-4373	LpL-HLA SINGLE ANTIGEN BEAD ASSAY	43200	43200	43200
KLO25-4374	LpL-HLA T & B CELL LYMPHOCYTE CROS	2000	2000	2000
KLO25-4375	LpL-HLA TRANSPLANT WORKUP PANEL 2	26500	26500	26500
KLO25-4376	LpL-HLAA2	4600	4600	4600
KLO25-4377	LpL-HLA–ABACAVIRHYPERSENSTIVITY	6500	6500	6500
KLO25-4378	LpL-HLA-ABC (CLASS I) TYPING	11100	11100	11100
KLO25-4379	LpL-HLA–ALLOPURINOL	6500	6500	6500
KLO25-4380	LpL-HLAB22	4600	4600	4600
KLO25-4381	LpL-HLA-B7	4600	4600	4600
KLO25-4382	LpL-HLA-B8	4600	4600	4600
KLO25-4383	LpL-HLABLOCUSANYANTIGEN	4600	4600	4600
KLO25-4384	LpL-HLACADAVERICCROSSMATCH	5500	5500	5500
KLO25-4385	LpL-HLA–CARBAMAZEPINE&PHENYTOIN	6500	6500	6500
KLO25-4386	LpL-HLACLOCUSANYANTIGEN	4600	4600	4600
KLO25-4387	LpL-HLACW6	4600	4600	4600
KLO25-4388	LpL-HLADNAHIGHRESOLUTIONTYPINGALOC	6500	6500	6500
KLO25-4389	LpL-HLADNAHIGHRESOLUTIONTYPINGBLOC	6500	6500	6500
KLO25-4390	LpL-HLADNAHIGHRESOLUTIONTYPINGCLOC	6500	6500	6500
KLO25-4391	LpL-HLADNAHIGHRESOLUTIONTYPINGDQB1	6500	6500	6500
KLO25-4392	LpL-HLADNAHIGHRESOLUTIONTYPINGDRB1	6500	6500	6500
KLO25-4393	LpL-HLA-DPA1 & -DPB1 TYPING	6500	6500	6500
KLO25-4394	LpL-HLADQB1TYPING	4600	4600	4600
KLO25-4395	LpL-HLA-DR DQB1 TYPING	9600	9600	9600
KLO25-4396	LpL-HLA-DRB EXTENDED TYPING: DRB3/	10500	10500	10500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4397	LpL-HLANARCOLEPSY(DRB1*15DQB1*0602	6700	6700	6700
KLO25-4398	LpL-HLATANDBCROSSMATCHBYFLOWCYTOME	4100	4100	4100
KLO25-4399	LpL-IGVH HYPERMUTATION ANALYSIS, C	21600	21600	21600
KLO25-4400	LpL-IGVH MUTATION DETECTION, SCREE	8100	8100	8100
KLO25-4401	LpL-IHC - FIBRONECTIN	2500	2500	2500
KLO25-4402	LpL-IHCCUSTOMPANEL	7300	7300	7300
KLO25-4403	LpL-IL6 EXTENDED PANEL	9400	9400	9400
KLO25-4404	LpL-ILD BASIC PANEL	6530	6530	6530
KLO25-4405	LpL-ILI/INFLUENZA LIKE ILLNESS SAR	11500	11500	11500
KLO25-4406	LpL-IMMATUREPLATELETFRACTION(IPF)	660	660	660
KLO25-4407	LpL-IMMIGRATION / IMMUNIZATION CHE	5500	5500	5500
KLO25-4408	LpL-IMMUNE DEFICIENCY PANEL 1 * CD	6700	6700	6700
KLO25-4409	LpL-IMMUNE DEFICIENCY PANEL 2; CD4	2600	2600	2600
KLO25-4410	LpL-IMMUNE DEFICIENCY PANEL 3; CD	2200	2200	2200
KLO25-4411	LpL-IMMUNE DEFICIENCY PANEL 4; CD	1800	1800	1800
KLO25-4412	LpL-IMMUNE DEFICIENCY PANEL 5 *CD3	2800	2800	2800
KLO25-4413	LpL-IMMUNOHISTIOCHEMISTRY - HEMOGL	2400	2400	2400
KLO25-4414	LpL-IMMUNOHISTIOCHEMISTRY NELL1	3800	3800	3800
KLO25-4415	LpL-IMMUNOHISTOCHEMISTRY ATRX	2300	2300	2300
KLO25-4416	LpL-IMMUNOHISTOCHEMISTRY BRACHYURY	2400	2400	2400
KLO25-4417	LpL-IMMUNOHISTOCHEMISTRY EXOSTOCIN	2700	2700	2700
KLO25-4418	LpL-IMMUNOHISTOCHEMISTRY MYOGLOBIN	2700	2700	2700
KLO25-4419	LpL-IMMUNOHISTOCHEMISTRY SDHB	2400	2400	2400
KLO25-4420	LpL-IMMUNOHISTOCHEMISTRY SEMA 3B	2700	2700	2700
KLO25-4421	LpL-IMMUNOHISTOCHEMISTRY THROMBOSP	2700	2700	2700
KLO25-4422	LpL-IMMUNOHISTOCHEMISTRY, ALKD5F3	4800	4800	4800
KLO25-4423	LpL-IMMUNOHISTOCHEMISTRY, ANDROGEN	2700	2700	2700
KLO25-4424	LpL-IMMUNOHISTOCHEMISTRY, ARGINASE	2400	2400	2400
KLO25-4425	LpL-IMMUNOHISTOCHEMISTRY, BLADDER	5400	5400	5400
KLO25-4426	LpL-IMMUNOHISTOCHEMISTRY, BRAF V60	2700	2700	2700
KLO25-4427	LpL-IMMUNOHISTOCHEMISTRY, CARBONIC	2400	2400	2400
KLO25-4428	LpL-IMMUNOHISTOCHEMISTRY, CD 19	2400	2400	2400
KLO25-4429	LpL-IMMUNOHISTOCHEMISTRY, CD 43	2400	2400	2400
KLO25-4430	LpL-IMMUNOHISTOCHEMISTRY, CD103	2400	2400	2400
KLO25-4431	LpL-IMMUNOHISTOCHEMISTRY, CD163	2400	2400	2400
KLO25-4432	LpL-IMMUNOHISTOCHEMISTRY, CD57	2400	2400	2400
KLO25-4433	LpL-IMMUNOHISTOCHEMISTRY, CD61	2200	2200	2200
KLO25-4434	LpL-IMMUNOHISTOCHEMISTRY, CDK4	2200	2200	2200
KLO25-4435	LpL-IMMUNOHISTOCHEMISTRY, DIGITAL	7600	7600	7600
KLO25-4436	LpL-IMMUNOHISTOCHEMISTRY, DIGITAL (A)	3800	3800	3800
KLO25-4437	LpL-IMMUNOHISTOCHEMISTRY, DIGITAL (B)	5400	5400	5400
KLO25-4438	LpL-IMMUNOHISTOCHEMISTRY, E-CADHER	2200	2200	2200
KLO25-4439	LpL-IMMUNOHISTOCHEMISTRY, FLI-1	2400	2400	2400
KLO25-4440	LpL-IMMUNOHISTOCHEMISTRY, GERM CEL	5400	5400	5400

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4441	LpL-IMMUNOHISTOCHEMISTRY, GLUTAMIN	2400	2400	2400
KLO25-4442	LpL-IMMUNOHISTOCHEMISTRY, GLYCOPHO	2400	2400	2400
KLO25-4443	LpL-IMMUNOHISTOCHEMISTRY, H3K27M	2700	2700	2700
KLO25-4444	LpL-IMMUNOHISTOCHEMISTRY, HEPPAR1	2400	2400	2400
KLO25-4445	LpL-IMMUNOHISTOCHEMISTRY, HSP70	2400	2400	2400
KLO25-4446	LpL-IMMUNOHISTOCHEMISTRY, IGG & IG	4300	4300	4300
KLO25-4447	LpL-IMMUNOHISTOCHEMISTRY, LANGERIN	2400	2400	2400
KLO25-4448	LpL-IMMUNOHISTOCHEMISTRY, LH	2200	2200	2200
KLO25-4449	LpL-IMMUNOHISTOCHEMISTRY, LIN-28	2400	2400	2400
KLO25-4450	LpL-IMMUNOHISTOCHEMISTRY, LMO2	2400	2400	2400
KLO25-4451	LpL-IMMUNOHISTOCHEMISTRY, LMW-CK	2400	2400	2400
KLO25-4452	LpL-IMMUNOHISTOCHEMISTRY, LUNG NON	15700	15700	15700
KLO25-4453	LpL-IMMUNOHISTOCHEMISTRY, MDM2	2200	2200	2200
KLO25-4454	LpL-IMMUNOHISTOCHEMISTRY, MESOTHEL	2400	2400	2400
KLO25-4455	LpL-IMMUNOHISTOCHEMISTRY, MICROSAT	9300	9300	9300
KLO25-4456	LpL-IMMUNOHISTOCHEMISTRY, MOC31	2400	2400	2400
KLO25-4457	LpL-IMMUNOHISTOCHEMISTRY, MUC4	2400	2400	2400
KLO25-4458	LpL-IMMUNOHISTOCHEMISTRY, MUC5AC	2400	2400	2400
KLO25-4459	LpL-IMMUNOHISTOCHEMISTRY, MUM1	2200	2200	2200
KLO25-4460	LpL-IMMUNOHISTOCHEMISTRY, MYOD1	2400	2400	2400
KLO25-4461	LpL-IMMUNOHISTOCHEMISTRY, OLIG2	2400	2400	2400
KLO25-4462	LpL-IMMUNOHISTOCHEMISTRY, P16	2200	2200	2200
KLO25-4463	LpL-IMMUNOHISTOCHEMISTRY, P40	2400	2400	2400
KLO25-4464	LpL-IMMUNOHISTOCHEMISTRY, P57	2400	2400	2400
KLO25-4465	LpL-IMMUNOHISTOCHEMISTRY, PD-1	5400	5400	5400
KLO25-4466	LpL-IMMUNOHISTOCHEMISTRY, PD-L1	3600	3600	3600
KLO25-4467	LpL-IMMUNOHISTOCHEMISTRY, PDL1 22C	15100	15100	15100
KLO25-4468	LpL-IMMUNOHISTOCHEMISTRY, PDL1 SP1	5400	5400	5400
KLO25-4469	LpL-IMMUNOHISTOCHEMISTRY, PERFORIN	2400	2400	2400
KLO25-4470	LpL-IMMUNOHISTOCHEMISTRY, PITUITAR	7000	7000	7000
KLO25-4471	LpL-IMMUNOHISTOCHEMISTRY, PLA2R (P	2200	2200	2200
KLO25-4472	LpL-IMMUNOHISTOCHEMISTRY, PLAP	2200	2200	2200
KLO25-4473	LpL-IMMUNOHISTOCHEMISTRY, PODOPLAN	2400	2400	2400
KLO25-4474	LpL-IMMUNOHISTOCHEMISTRY, PROSTATE	3800	3800	3800
KLO25-4475	LpL-IMMUNOHISTOCHEMISTRY, ROS1	4500	4500	4500
KLO25-4476	LpL-IMMUNOHISTOCHEMISTRY, SAT-B2	2400	2400	2400
KLO25-4477	LpL-IMMUNOHISTOCHEMISTRY, SOX10	2200	2200	2200
KLO25-4478	LpL-IMMUNOHISTOCHEMISTRY, SOX-11	2400	2400	2400
KLO25-4479	LpL-IMMUNOHISTOCHEMISTRY, STAT6	2400	2400	2400
KLO25-4480	LpL-IMMUNOHISTOCHEMISTRY, TSH	2200	2200	2200
KLO25-4481	LpL-IMMUNOHISTOCHEMISTRY,BOB1	2400	2400	2400
KLO25-4482	LpL-IMMUNOHISTOCHEMISTRY,CD2	2400	2400	2400
KLO25-4483	LpL-IMMUNOHISTOCHEMISTRY,GLUT1	2400	2400	2400
KLO25-4484	LpL-IMMUNOHISTOCHEMISTRY,HHV-8	2800	2800	2800

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4485	LpL-IMMUNOHISTOCHEMISTRY,NEUROENDO	5400	5400	5400
KLO25-4486	LpL-IMMUNOHISTOCHEMISTRY,NKX2.2	2400	2400	2400
KLO25-4487	LpL-IMMUNOHISTOCHEMISTRY,OCT 3/4	2400	2400	2400
KLO25-4488	LpL-IMMUNOHISTOCHEMISTRY,SOX2	2400	2400	2400
KLO25-4489	LpL-IMMUNOHISTOCHEMISTRY. NKX 3.1	2200	2200	2200
KLO25-4490	LpL-INFERTILITY COMPREHENSIVE PANE	2500	2500	2500
KLO25-4491	LpL-INFERTILITYPANEL2*FS	2700	2700	2700
KLO25-4492	LpL-INFLIXIMAB ANTIBODY	24600	24600	24600
KLO25-4493	LpL-INI1	2300	2300	2300
KLO25-4494	LpL-INV 16 (P13Q22) / T(16;16)(P13	5600	5600	5600
KLO25-4495	LpL-INV16(P13Q22) T(1616)(P13Q22)G	3850	3850	3850
KLO25-4496	LpL-Inv16(p13q22)t(1616)(p13q22)GE	4500	4500	4500
KLO25-4497	LpL-JAK 2 MUTATION DETECTION, QUAL	5700	5700	5700
KLO25-4498	LpL-JAK2 V617F ALLELIC RATIO	10800	10800	10800
KLO25-4499	LpL-JAK2EXON12MUTATION	5800	5800	5800
KLO25-4500	LpL-JAK2V617FCALRANDMPLPROFILE	12400	12400	12400
KLO25-4501	LpL-JAK2V617FREFLEXTOJAK2EXON12MUT	8000	8000	8000
KLO25-4502	LpL-JAPANESE ENCEPHALITIS VIRUS (J	3200	3200	3200
KLO25-4503	LpL-JC VIRUS, QUANTITATIVE, REAL T	4500	4500	4500
KLO25-4504	LpL-JC/BK VIRUS PANEL, QUANTITATIV	10200	10200	10200
KLO25-4505	LpL-KIDNEY STONE FORMATION, DIAGNO	5500	5500	5500
KLO25-4506	LpL-KIDNEY STONE FORMATION, THERAP	4700	4700	4700
KLO25-4507	LpL-KIR GENOTYPING	10800	10800	10800
KLO25-4508	LpL-KRASANDNRASMUTATIONALANALYSISP	11900	11900	11900
KLO25-4509	LpL-KRASCODON61MUTATIONDETECTIONBY	6700	6700	6700
KLO25-4510	LpL-KRASMUTATIONCODON1213	8100	8100	8100
KLO25-4511	LpL-LEUCOCYTE ADHESION DEFICIENCY	4300	4300	4300
KLO25-4512	LpL-LEUKEMIA GENETIC PROFILE - AN	7100	7100	7100
KLO25-4513	LpL-LEUKEMIA / LYMPHOMA DIAGNOSTIC	16200	16200	16200
KLO25-4514	LpL-LEUKEMIA DIAGNOSTIC COMPREHENS	16200	16200	16200
KLO25-4515	LpL-LEUKEMIA DIAGNOSTIC PANEL,CUST	10000	10000	10000
KLO25-4516	LpL-LEUKEMIA DIAGNOSTIC PANEL: AML	11600	11600	11600
KLO25-4517	LpL-LEUKEMIA DIAGNOSTIC PANEL;CLL/	9700	9700	9700
KLO25-4518	LpL-LEUKEMIA MONITORING PANEL: HAI	10000	10000	10000
KLO25-4519	LpL-LEUKEMIADIAGNOSTICPA	9700	9700	9700
KLO25-4520	LpL-LEUKEMIADIAGNOSTICPANELPLASMAC	7900	7900	7900
KLO25-4521	LpL-LUNG CANCER 12-GENE PANEL	32400	32400	32400
KLO25-4522	LpL-LUNG CANCER PANEL: 12 GENE WIT	40000	40000	40000
KLO25-4523	LpL-LUNGCANCERMUTATIONPANEL*ALK1*E	17300	17300	17300
KLO25-4524	LpL-LYMEDISEASE(BORRELIA	3600	3600	3600
KLO25-4525	LpL-LYMEDISEASE(BORRELIA (A)	9400	9400	9400
KLO25-4526	LpL-LYMEDISEASE(BORRELIA(A)	7600	7600	7600
KLO25-4527	LpL-LYMPHOCYTE SUBSET ENUMERATION	5400	5400	5400
KLO25-4528	LpL-LYMPHOMA DIAGNOSTIC PANEL	18400	18400	18400

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4529	LpL-MAFLD PANEL	2270	2270	2270
KLO25-4530	LpL-MICROSATELLITE INSTABILITY (MS	10800	10800	10800
KLO25-4531	LpL-MINIMAL RESIDUAL DISEASE (MRD)	14600	14600	14600
KLO25-4532	LpL-MINIMAL RESIDUAL DISEASE (MRD) (A)	13000	13000	13000
KLO25-4533	LpL-MINIMALRESIDUALDISEASE(MRD)ANA	11200	11200	11200
KLO25-4534	LpL-MONOCLONAL GAMMOPATHY OF UNDET	7600	7600	7600
KLO25-4535	LpL-MULTIPLE MYELOMA COMPREHENSIVE	16200	16200	16200
KLO25-4536	LpL-NAFLD - PNPLA3 & TM6SF2 GENOTY	3800	3800	3800
KLO25-4537	LpL-NATURALKILLERCELLS*C	4200	4200	4200
KLO25-4538	LpL-NEOPTERIN	18400	18400	18400
KLO25-4539	LpL-NERVE BIOPSY PANEL	6000	6000	6000
KLO25-4540	LpL-NEUROBLASTOMA PROFILE, 24-HOUR	6500	6500	6500
KLO25-4541	LpL-NGS COLON PANEL	7500	7500	7500
KLO25-4542	LpL-NGS GASTRO PANEL *ERBB2, *KIT,	7500	7500	7500
KLO25-4543	LpL-NGS LUNG PANEL *MET, *KRAS, *B	7500	7500	7500
KLO25-4544	LpL-NGS NEURO PANEL *ATRX *TP53 *	7500	7500	7500
KLO25-4545	LpL-NOTCH3 MUTATION DETECTION; CAD	10800	10800	10800
KLO25-4546	LpL-NPM1 GENE MUTATION QUANTITATIV	4300	4300	4300
KLO25-4547	LpL-NPM1GENEMUTATION	3740	3740	3740
KLO25-4548	LpL-NPM1GENEMUTATION (A)	4300	4300	4300
KLO25-4549	LpL-NRASMUTATIONCODON1213&61	6700	6700	6700
KLO25-4550	LpL-NSCLC (NON-SMALL CELL LUNG C	13000	13000	13000
KLO25-4551	LpL-NX GEN CLINICAL EXOME SEQUENCI	23500	23500	23500
KLO25-4552	LpL-NX GEN CLINICAL EXOME SEQUENCI (A)	25400	25400	25400
KLO25-4553	LpL-NX GEN SEQ, FAMILIAL HEMIPLEG	21600	21600	21600
KLO25-4554	LpL-NX GEN SEQ, 4H SYNDROME	20000	20000	20000
KLO25-4555	LpL-NX GEN SEQ, ADRENOLEUKODYSTROP	21600	21600	21600
KLO25-4556	LpL-NX GEN SEQ, AICARDI-GOUTIERES	20000	20000	20000
KLO25-4557	LpL-NX GEN SEQ, ALBINISM	24500	24500	24500
KLO25-4558	LpL-NX GEN SEQ, ALEXANDER DISEASE	21600	21600	21600
KLO25-4559	LpL-NX GEN SEQ, ALKAPTONURIA	20000	20000	20000
KLO25-4560	LpL-NX GEN SEQ, AMYOTROPHIC LATERA	20000	20000	20000
KLO25-4561	LpL-NX GEN SEQ, ATAXIA-TELANGIECTA	21600	21600	21600
KLO25-4562	LpL-NX GEN SEQ, CANAVAN DISEASE	20000	20000	20000
KLO25-4563	LpL-NX GEN SEQ, CATARACT	24500	24500	24500
KLO25-4564	LpL-NX GEN SEQ, CHARCOT-MARIE-TOOT	21600	21600	21600
KLO25-4565	LpL-NX GEN SEQ, CORNEAL DYSTROPHY	24500	24500	24500
KLO25-4566	LpL-NX GEN SEQ, DRAVET'S SYNDROME	20000	20000	20000
KLO25-4567	LpL-NX GEN SEQ, DUCHENNE & BECKER	21600	21600	21600
KLO25-4568	LpL-NX GEN SEQ, GLAUCOMA	24500	24500	24500
KLO25-4569	LpL-NX GEN SEQ, HEREDITARY RETINOB	26500	26500	26500
KLO25-4570	LpL-NX GEN SEQ, LEBER CONGENITAL A	24500	24500	24500
KLO25-4571	LpL-NX GEN SEQ, MEGALOENCEPHALIC	20000	20000	20000
KLO25-4572	LpL-NX GEN SEQ, MICROPHTHALMIA/ANO	24500	24500	24500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4573	LpL-NX GEN SEQ, OPHTHALMOPLEGIA	24500	24500	24500
KLO25-4574	LpL-NX GEN SEQ, OPTIC ATROPHY	24500	24500	24500
KLO25-4575	LpL-NX GEN SEQ, RETINITIS PIGMENTO	26500	26500	26500
KLO25-4576	LpL-NX GEN SEQ, USHER SYNDROME	26500	26500	26500
KLO25-4577	LpL-NX GEN SEQUENCING - ATAXIA NGS	21600	21600	21600
KLO25-4578	LpL-NX GEN SEQUENCING - AUTISM NGS	20000	20000	20000
KLO25-4579	LpL-NX GEN SEQUENCING - AUTISM/ADH	21600	21600	21600
KLO25-4580	LpL-NX GEN SEQUENCING - AUTISM/ADH (A)	20000	20000	20000
KLO25-4581	LpL-NX GEN SEQUENCING - BRADYKINES	20000	20000	20000
KLO25-4582	LpL-NX GEN SEQUENCING - BRAIN MUSC	20000	20000	20000
KLO25-4583	LpL-NX GEN SEQUENCING - CHARCOT-MA	21600	21600	21600
KLO25-4584	LpL-NX GEN SEQUENCING - CHRONIC PR	20000	20000	20000
KLO25-4585	LpL-NX GEN SEQUENCING - COGNITIVE	20000	20000	20000
KLO25-4586	LpL-NX GEN SEQUENCING - COMPREHENS	21600	21600	21600
KLO25-4587	LpL-NX GEN SEQUENCING - DEMENTIA N	20000	20000	20000
KLO25-4588	LpL-NX GEN SEQUENCING - DEVELOPMEN	20000	20000	20000
KLO25-4589	LpL-NX GEN SEQUENCING - DEVELOPMEN (A)	20000	20000	20000
KLO25-4590	LpL-NX GEN SEQUENCING - DYSTONIA N	21600	21600	21600
KLO25-4591	LpL-NX GEN SEQUENCING - EPILEPSY C	21600	21600	21600
KLO25-4592	LpL-NX GEN SEQUENCING - FREQUENT F	20000	20000	20000
KLO25-4593	LpL-NX GEN SEQUENCING - GENETIC NE	20000	20000	20000
KLO25-4594	LpL-NX GEN SEQUENCING - HEADACHE N	20000	20000	20000
KLO25-4595	LpL-NX GEN SEQUENCING - HEREDITARY	20000	20000	20000
KLO25-4596	LpL-NX GEN SEQUENCING - HYPOKALEMI	21600	21600	21600
KLO25-4597	LpL-NX GEN SEQUENCING - IDIOPATHIC	20000	20000	20000
KLO25-4598	LpL-NX GEN SEQUENCING - LISSENCEPH	20000	20000	20000
KLO25-4599	LpL-NX GEN SEQUENCING - MICROCEPHA	20000	20000	20000
KLO25-4600	LpL-NX GEN SEQUENCING - MOTOR NEUR	20000	20000	20000
KLO25-4601	LpL-NX GEN SEQUENCING - NEURODEGEN (A)	20000	20000	20000
KLO25-4602	LpL-NX GEN SEQUENCING - NEUROMUSCU	21600	21600	21600
KLO25-4603	LpL-NX GEN SEQUENCING - NEURO-OPTH	20000	20000	20000
KLO25-4604	LpL-NX GEN SEQUENCING - NON KETOTI	21600	21600	21600
KLO25-4605	LpL-NX GEN SEQUENCING - ORGANIC AC	21600	21600	21600
KLO25-4606	LpL-NX GEN SEQUENCING - PARKINSON'	20000	20000	20000
KLO25-4607	LpL-NX GEN SEQUENCING - PARKINSON’	21600	21600	21600
KLO25-4608	LpL-NX GEN SEQUENCING - SLEEP DIST	20000	20000	20000
KLO25-4609	LpL-NX GEN SEQUENCING - SPASTIC PA	21600	21600	21600
KLO25-4610	LpL-NX GEN SEQUENCING - STRUCTURAL	20000	20000	20000
KLO25-4611	LpL-NX GEN SEQUENCING - TREMORS NG	20000	20000	20000
KLO25-4612	LpL-NX GEN SEQUENCING - WHITE MATT	20000	20000	20000
KLO25-4613	LpL-NX GEN SEQUENCING - X-LINKED D	20000	20000	20000
KLO25-4614	LpL-NX GEN SEQUENCING CHARCOT-MARI	21600	21600	21600
KLO25-4615	LpL-NX GEN SEQUENCING -COMPREHENSI	20000	20000	20000
KLO25-4616	LpL-NX GEN SEQUENCING -MITOCHONDRI	20000	20000	20000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4617	LpL-NX GEN SEQUENCING: ALPORT SYND	16500	16500	16500
KLO25-4618	LpL-NX GEN SEQUENCING: ARRHYTHMOGE	20000	20000	20000
KLO25-4619	LpL-NX GEN SEQUENCING: ATRIAL FIBR	20000	20000	20000
KLO25-4620	LpL-NX GEN SEQUENCING: BRUGADA-SYN	20000	20000	20000
KLO25-4621	LpL-NX GEN SEQUENCING: C3 GLOMERUL	21600	21600	21600
KLO25-4622	LpL-NX GEN SEQUENCING: CARDIAC CHA	21600	21600	21600
KLO25-4623	LpL-NX GEN SEQUENCING: COMPREHENSI	20000	20000	20000
KLO25-4624	LpL-NX GEN SEQUENCING: COMPREHENSI (A)	21600	21600	21600
KLO25-4625	LpL-NX GEN SEQUENCING: CONGENITAL	20000	20000	20000
KLO25-4626	LpL-NX GEN SEQUENCING: CYSTIC KIDN	21600	21600	21600
KLO25-4627	LpL-NX GEN SEQUENCING: DILATED CAR	20000	20000	20000
KLO25-4628	LpL-NX GEN SEQUENCING: EHLERS-DANL	20000	20000	20000
KLO25-4629	LpL-NX GEN SEQUENCING: EYE MOVEMEN	20000	20000	20000
KLO25-4630	LpL-NX GEN SEQUENCING: GLOMERULAR	20000	20000	20000
KLO25-4631	LpL-NX GEN SEQUENCING: HEREDITARY	21600	21600	21600
KLO25-4632	LpL-NX GEN SEQUENCING: HEREDITARY (A)	20000	20000	20000
KLO25-4633	LpL-NX GEN SEQUENCING: HEREDITARY (B)	16500	16500	16500
KLO25-4634	LpL-NX GEN SEQUENCING: HETEROTAXY	20000	20000	20000
KLO25-4635	LpL-NX GEN SEQUENCING: HYPERCHOLES	20000	20000	20000
KLO25-4636	LpL-NX GEN SEQUENCING: HYPERTROPHI	20000	20000	20000
KLO25-4637	LpL-NX GEN SEQUENCING: HYPOKALEMIA	20000	20000	20000
KLO25-4638	LpL-NX GEN SEQUENCING: IDIOPATHIC	20000	20000	20000
KLO25-4639	LpL-NX GEN SEQUENCING: ISOLATED AN	20000	20000	20000
KLO25-4640	LpL-NX GEN SEQUENCING: LEFT VENTRI	20000	20000	20000
KLO25-4641	LpL-NX GEN SEQUENCING: LEIGH SYNDR	20000	20000	20000
KLO25-4642	LpL-NX GEN SEQUENCING: LEUKODYSTRO	21600	21600	21600
KLO25-4643	LpL-NX GEN SEQUENCING: LOEYS-DIETZ	20000	20000	20000
KLO25-4644	LpL-NX GEN SEQUENCING: LONG QT SYN	20000	20000	20000
KLO25-4645	LpL-NX GEN SEQUENCING: LOSS OF PRE	21600	21600	21600
KLO25-4646	LpL-NX GEN SEQUENCING: MATURITY ON	25400	25400	25400
KLO25-4647	LpL-Nx GEN SEQUENCING: MOVEMENT D	20000	20000	20000
KLO25-4648	LpL-NX GEN SEQUENCING: NEPHROTIC S	21600	21600	21600
KLO25-4649	LpL-NX GEN SEQUENCING: NEUROMETABO	20000	20000	20000
KLO25-4650	LpL-NX GEN SEQUENCING: POLYCYSTIC	20000	20000	20000
KLO25-4651	LpL-NX GEN SEQUENCING: PREMATURE O	20000	20000	20000
KLO25-4652	LpL-NX GEN SEQUENCING: PROTEINURIC	20000	20000	20000
KLO25-4653	LpL-NX GEN SEQUENCING: PULMONARY A	20000	20000	20000
KLO25-4654	LpL-NX GEN SEQUENCING: RASOPATHY A	20000	20000	20000
KLO25-4655	LpL-NX GEN SEQUENCING: RECURRENT H	20000	20000	20000
KLO25-4656	LpL-NX GEN SEQUENCING: RENAL TUBUL	21600	21600	21600
KLO25-4657	LpL-NX GEN SEQUENCING: RENAL TUBUL (A)	20000	20000	20000
KLO25-4658	LpL-NX GEN SEQUENCING: SHORT QT SY	20000	20000	20000
KLO25-4659	LpL-NX GEN SEQUENCING: SPASTIC PAR	21600	21600	21600
KLO25-4660	LpL-NX GEN SEQUENCING: STEROID RES	21600	21600	21600

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4661	LpL-NX GEN TUBEROUS SCLEROSIS COMP	25400	25400	25400
KLO25-4662	LpL-NX GEN WHOLE EXOME SEQUENCING	30000	30000	30000
KLO25-4663	LpL-NX GEN WHOLE EXOME SEQUENCING (A)	32400	32400	32400
KLO25-4664	LpL-NX GEN WHOLE EXOME SEQUENCING,	70000	70000	70000
KLO25-4665	LpL-NX GNX GEN SEQUENCING: HEREDIT	21600	21600	21600
KLO25-4666	LpL-ONCOMINE ACUTE MYELOID LEUKAE	37800	37800	37800
KLO25-4667	LpL-ONCOMINE CHRONIC MYELOID LEUKA	37800	37800	37800
KLO25-4668	LpL-ONCOMINE CHRONIC MYELOMONOCYTI	37800	37800	37800
KLO25-4669	LpL-ONCOMINE COMPREHENSIVE MYELOID	41000	41000	41000
KLO25-4670	LpL-ONCOMINE JUVENILWE MYELOMONOCY	35000	35000	35000
KLO25-4671	LpL-ONCOMINE MYELODYSPLASTIC (MDS)	37800	37800	37800
KLO25-4672	LpL-ONCOMINE MYELOPROLIFERATIVE NE	37800	37800	37800
KLO25-4673	LpL-ONCOMINECOMPREHENSIVE LEUKAEMI	38000	38000	38000
KLO25-4674	LpL-ONCOPRO 12 GENE LUNG CANCER PA	31400	31400	31400
KLO25-4675	LpL-ONCOPRO CANCERTRACK MRD - FOLL	70400	70400	70400
KLO25-4676	LpL-ONCOPRO COMPREHENSIVE CANCER P	45400	45400	45400
KLO25-4677	LpL-ONCOPRO EGFR ARMS PCR	10300	10300	10300
KLO25-4678	LpL-ONCOPRO ENDOMETRIAL CANCER PAN	32500	32500	32500
KLO25-4679	LpL-ONCOPRO FOCUS FUSION PANEL FOR	37800	37800	37800
KLO25-4680	LpL-ONCOPRO GLIOSENSE PANEL	81250	81250	81250
KLO25-4681	LpL-ONCOPRO HEREDITARY CANCER RIS	30200	30200	30200
KLO25-4682	LpL-ONCOPRO HEREDITARY CANCER RIS (A)	27000	27000	27000
KLO25-4683	LpL-ONCOPRO HOMOLOGOUS RECOMBINATI	27000	27000	27000
KLO25-4684	LpL-ONCOPRO LUNG BASIC PANEL-ALK1,	13000	13000	13000
KLO25-4685	LpL-ONCOPRO OCA PLUS COMPREHENSIVE	105100	105100	105100
KLO25-4686	LpL-ONCOPRO OCA PLUS COMPREHENSIVE (A)	90000	90000	90000
KLO25-4687	LpL-ONCOPRO PANCANCER CTC PANEL -	46600	46600	46600
KLO25-4688	LpL-ONCOPRO PANCANCER PANEL - LIQU	42250	42250	42250
KLO25-4689	LpL-ONCOPRO PIK3CA MUTATION ANALYS	19500	19500	19500
KLO25-4690	LpL-ONCOPRO TARGET FOCUS LIQUID BI	118800	118800	118800
KLO25-4691	LpL-ONCOPRO TMB & MSI PROFILE	64800	64800	64800
KLO25-4692	LpL-ONCOPRO TSO500 COMPREHENSIVE G	200000	200000	200000
KLO25-4693	LpL-ONCOPRO TUMOR MUTATION BURDEN	64800	64800	64800
KLO25-4694	LpL-OSTEOPOROSIS PANEL	5000	5000	5000
KLO25-4695	LpL-OVARIANCANCERPANEL(CA125*INHIB	3500	3500	3500
KLO25-4696	LpL-PML RARA T(15;17)(Q22;Q12) GEN	5600	5600	5600
KLO25-4697	LpL-PML-RARA GENE REARRANGEMENT, Q	4850	4850	4850
KLO25-4698	LpL-PML-RARA GENE REARRANGEMENT, Q (A)	5600	5600	5600
KLO25-4699	LpL-PMLRARAT(1517)(Q22Q12)GENEREAR	5600	5600	5600
KLO25-4700	LpL-PROSTATE TRUS BIOPSY AI PANEL	6900	6900	6900
KLO25-4701	LpL-RESPIRATORY PANEL 9	15100	15100	15100
KLO25-4702	LpL-RESPIRATORYCOMPREHENSIVEPANEL*	16200	16200	16200
KLO25-4703	LpL-RESPIRATORYPANEL1	3200	3200	3200
KLO25-4704	LpL-RESPIRATORYPANEL2	3200	3200	3200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4705	LpL-RESPIRATORYPANEL3	3200	3200	3200
KLO25-4706	LpL-RESPIRATORYPANEL4	3200	3200	3200
KLO25-4707	LpL-RESPIRATORYPANEL5	7600	7600	7600
KLO25-4708	LpL-RESPIRATORYPANEL6	3200	3200	3200
KLO25-4709	LpL-RESPIRATORYPANEL7	3200	3200	3200
KLO25-4710	LpL-RESPIRATORYPANEL8	3200	3200	3200
KLO25-4711	LpL-RETTSYNDROMEDETECTIONBYPCRSEQU	7400	7400	7400
KLO25-4712	LpL-SPINALMUSCULARATROPHY(SMA)CARR	4300	4300	4300
KLO25-4713	LpL-SPINALMUSCULARATROPHY(SMA)MUTA	3200	3200	3200
KLO25-4714	LpL-SPINO-BULBAR-MUSCULAR ATROPHY	8600	8600	8600
KLO25-4715	LpL-STRIATEDSKELETALMUSC	3600	3600	3600
KLO25-4716	LpL-STRIATEDSKELETALMUSC (A)	2200	2200	2200
KLO25-4717	LpL-T REGULATORY CELLS (TREGS)	10800	10800	10800
KLO25-4718	LpL-t(1;19)(Q23;P13.3);TCF3-PBX1(E	3500	3500	3500
KLO25-4719	LpL-t(11;19)(Q23;P13.3),(MLL-ENL),	3500	3500	3500
KLO25-4720	LpL-T(1119)(Q23P133)(MLLENL)PCR	3030	3030	3030
KLO25-4721	LpL-T(119)(Q23P133)TCF3PBX1(E2APBX	3030	3030	3030
KLO25-4722	LpL-t(12;21)(P13;Q22);ETV6-RUNX1(T	3500	3500	3500
KLO25-4723	LpL-T(1221)(P13Q22)ETV6RUNX1(TELAM	3030	3030	3030
KLO25-4724	LpL-T(411)(Q21Q23)(MLLAF4)PCR	3030	3030	3030
KLO25-4725	LpL-t(9;11)(P21-22;Q23);(MLL-AF9),	3500	3500	3500
KLO25-4726	LpL-T(911)(P2122Q23)(MLLAF9)PCR	3030	3030	3030
KLO25-4727	LpL-THALASSEMIA ALPHA TRIO PRENATA	12000	12000	12000
KLO25-4728	LpL-THALASSEMIA ALPHA, MUTATION A	4300	4300	4300
KLO25-4729	LpL-THALASSEMIA BETA TRIO PRENATAL	18000	18000	18000
KLO25-4730	LpL-THALASSEMIA MONITORING PANEL	3800	3800	3800
KLO25-4731	LpL-THALASSEMIABETAMUTATIONANALYSI	5900	5900	5900
KLO25-4732	LpL-TLE1(1F5)	2300	2300	2300
KLO25-4733	LpL-TOPIRAMATE	7000	7000	7000
KLO25-4734	LpL-TRANSPLANT INFECTIOUS SCREENIN	13000	13000	13000
KLO25-4735	LpL-TRIPLE NEGATIVE BREAST CANCER	7000	7000	7000
KLO25-4736	LpL-UGT1A1 GENE POLYMORPHISM (NUCL	5900	5900	5900
KLO25-4737	LpL-ZNT8 (ZINC TRANSPORTER 8) ANTI	4300	4300	4300
KLO25-4738	LSD URINE QUALITATIVE	8100	8100	8100
KLO25-4739	LUNG CANCER (FISH + NGS) (BS)	27600	27600	27600
KLO25-4740	LUNG CANCER 12 GENE PANEL	32400	32400	32400
KLO25-4741	LUNG CANCER MUTATION PANEL	17300	17300	17300
KLO25-4742	LUNG CANCER MUTATION PANEL (WITH KRAS)-USA	77850	77850	77850
KLO25-4743	LUNG CANCER -REARRANGEMENT -FISH	32400	32400	32400
KLO25-4744	LUPUS ANTI COAGULANT BY DRVVT	1900	1900	1900
KLO25-4745	LUPUS ANTICOAGULANT PANEL; LAC PANEL *APTT *PTT - LA *DRVVT	2730	2730	2730
KLO25-4746	LUPUS ANTICOAGULANT(PTT-LA)	1230	1230	1230
KLO25-4747	LUPUS ERYTHEMATOSUS PANEL; SLE PANEL	7560	7560	7560
KLO25-4748	LYME DISEASE (BORRELIA BURGDORFERI) DNA, QUALITATIVE, PCR	25400	25400	25400

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4749	LYME DISEASE (BORRELIA BURGDORFERI), IGG & IGM, IMMUNOBLOT	17600	17600	17600
KLO25-4750	LYME DISEASE (BORRELIA BURGDORFERI), IGG & IGM, WESTERN BLOT	3300	3300	3300
KLO25-4751	LYME DISEASE (BORRELIA BURGDORFERI), IGG ANTIBODY	1850	1850	1850
KLO25-4752	LYME DISEASE (BORRELIA BURGDORFERI), IGG, WESTERN BLOT	7420	7420	7420
KLO25-4753	LYME DISEASE (BORRELIA BURGDORFERI), IGM ANTIBODY	2000	2000	2000
KLO25-4754	LYME DISEASE (BORRELIA BURGDORFERI), IGM WESTERN BLOT	5700	5700	5700
KLO25-4755	LYME DISEASE (IGG + IGM)	3600	3600	3600
KLO25-4756	LYMPHOCYTE SUBSET CD 3%	1870	1870	1870
KLO25-4757	LYMPHOCYTE SUBSET CD4%	1100	1100	1100
KLO25-4758	LYMPHOCYTE SUBSET CD8%	1870	1870	1870
KLO25-4759	LYMPHOCYTE SUBSET ENUMERATION (B/T/NK QUANTIFICATION) (M)	5400	5400	5400
KLO25-4760	LYMPHOCYTE SUBSET PANEL, BASIC	4500	4500	4500
KLO25-4761	LYMPHOCYTE SUBSETTING CD4 & CD8 CELLS (CD45+/CD3+/ CD4+ /CD8+) (M)	1500	1500	1500
KLO25-4762	LYMPHOCYTES SUBSET PANEL, NK CELLS	6000	6000	6000
KLO25-4763	LYMPHOMA DIAGNOSTIC PANEL	18400	18400	18400
KLO25-4764	LYMPHOPROLIFERATIVE DISORDER CLASSIFIER PANEL - FLOWCYTOMETRY (M)	12000	12000	12000
KLO25-4765	LYMPHOPROLIFERATIVE DISORDER GENE PANEL (M)	36000	36000	36000
KLO25-4766	LYNCH SYNDROME (HNPCC) - (MLH1, MSH2, EPCAM) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-4767	LYNCH SYNDROME / HNPCC GENE PANEL (M)	33000	33000	33000
KLO25-4768	LYNCH SYNDROME MISMATCH REPAIR (MMR) 4 GENE (MLH1, MLH2, MSH6 & PMS2) PANEL - IHC [MICROSA	8000	8000	8000
KLO25-4769	LYSINE, SCREEN -SERUM	5950	5950	5950
KLO25-4770	LYSINE, SCREEN -URINE	5950	5950	5950
KLO25-4771	LYSOSOMAL ACID LIPASE DEFICIENCY (LIPA GENE) (M)	17000	17000	17000
KLO25-4772	LYSOSOMAL STORAGE DISORDER SCREEN - MINI (M)	30000	30000	30000
KLO25-4773	LYSOSOMAL STORAGE DISORDER (BS)	40800	40800	40800
KLO25-4774	LYSOZYME- PLASMA	9500	9500	9500
KLO25-4775	LYSOZYME URINE	9500	9500	9500
KLO25-4776	MACROCYTIC ANEMIA PANEL	2200	2200	2200
KLO25-4777	MACROPROLACTIN	18700	18700	18700
KLO25-4778	MAG ANTIBODIES	4360	4360	4360
KLO25-4779	MALARIA ANTIBODY IGG	1100	1100	1100
KLO25-4780	MALARIA DETECTION BY PCR	3600	3600	3600
KLO25-4781	MALARIA DETECTION BY QBC	330	330	330
KLO25-4782	MALARIA VIVAX AND FALCIPARUM ANTIGEN	650	650	650
KLO25-4783	MALDITOF - YEAST IDENTIFICATION	1200	1200	1200
KLO25-4784	MALDITOF- BACTERIA IDENTIFICATION	1200	1200	1200
KLO25-4785	MALDITOF-MS MOLD IDENTIFICATION	1200	1200	1200
KLO25-4786	MALDITOF-MS MYCOBACTERIUM SPECIATION	1200	1200	1200
KLO25-4787	MALE INFERTILITY -BASIC PACAKGE (BS)	16500	16500	16500
KLO25-4788	MALE INFERTILITY -EXTENDED PACAKGE (BS)	28000	28000	28000
KLO25-4789	MANGANESE, 24 HRS. URINE	2100	2100	2100
KLO25-4790	MANGANESE, SERUM/PLASMA	2100	2100	2100
KLO25-4791	MANGANESE, URINE RANDOM	2100	2100	2100
KLO25-4792	MANTLE CELL LYMPHOMA RT PCR, PLASMA BASED	25260	25260	25260

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4793	MANTLE CELL LYMPHOMA RT PCR, PLASMA BASED LEUMETA	17300	17300	17300
KLO25-4794	MAPLE SYRUP URINE DISEASE GENE PANEL (M)	25000	25000	25000
KLO25-4795	MAPROTILINE (LUDIOMIL)	7030	7030	7030
KLO25-4796	MARFAN SYNDROME (FBN1) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-4797	MARFAN SYNDROME (FBN1) GENE ANALYSIS (M)	25000	25000	25000
KLO25-4798	MARIJUANA METABOLITE (50), CANNABINOIDS	750	750	750
KLO25-4799	MARIJUANA METABOLITE , CANNABINOIDS . SCREEN URINE	690	690	690
KLO25-4800	MATERNAL BLOOD FOR FETAL DNA	16200	16200	16200
KLO25-4801	MATERNAL BLOOD FOR FETAL DNA (MBFD) WITH MICRODELETIONS	30200	30200	30200
KLO25-4802	MATERNAL CELL CONTAMINATION (G)	1750	1750	1750
KLO25-4803	MATERNAL CELL CONTAMINATION (MCC) CHECK IN PRENATAL DNA (M)	7000	7000	7000
KLO25-4804	MATERNAL SCREEN (QF PCR)	6500	6500	6500
KLO25-4805	MATERNAL SCREEN 4 (QUADRUPPLE TEST)	3300	3300	3300
KLO25-4806	MATERNAL SCREEN -5 (PENTA SCREEN)	7200	7200	7200
KLO25-4807	MATERNAL SCREENING; SEQUENTIAL INTEGRATED TEST	6650	6650	6650
KLO25-4808	MATERNAL SERUM SCREEN 2, ADVANCED REFLEX TO MBFD-21	3000	3000	3000
KLO25-4809	MATURITY-ONSET DIABETES OF THE YOUNG (MODY) & NEONATAL DIABETES GENE PANEL (M)	13000	13000	13000
KLO25-4810	MATURITY-ONSET DIABETES OF THE YOUNG (MODY) GENE PANEL (BS)	42000	42000	42000
KLO25-4811	MBFD - TRISOMY 21	28000	28000	28000
KLO25-4812	MCARDLE DISEASE (PYGM) GENE ANALYSIS (M)	17000	17000	17000
KLO25-4813	MCC (M)	7000	7000	7000
KLO25-4814	MDMA & METABOLITES, RANDOM URINE	7500	7500	7500
KLO25-4815	MDMA QUALITATIVE, ECSTASY, XTC	700	700	700
KLO25-4816	MDR-TB RAPID GENOTYPIC TEST	1600	1600	1600
KLO25-4817	MDS PANEL (MYELOID NGS PANEL + MDS (BS)	33600	33600	33600
KLO25-4818	MDS PROGNOSTICATION AND RISK STRATIFICATION GENE PANEL (M)	36000	36000	36000
KLO25-4819	MDS-AML FAMILIAL GENE PANEL (M)	36000	36000	36000
KLO25-4820	MDS-AML FAMILIAL GENE PANEL-REFLEX (M)	15000	15000	15000
KLO25-4821	MEASLES (RUBEOLA) ANTIBODIES PANEL, IGG & IGM	3200	3200	3200
KLO25-4822	MEASLES (RUBEOLA) ANTIBODY, IGG	1800	1800	1800
KLO25-4823	MEASLES (RUBEOLA) ANTIBODY, IGM	1800	1800	1800
KLO25-4824	MEASLES (RUBEOLA) IGG ANTIBODIES, CSF	2700	2700	2700
KLO25-4825	MECKEL GRUBER SYNDROME GENE PANEL (M)	36000	36000	36000
KLO25-4826	Med [Combo] KaryoSeq [Low Pass Whole Genome Sequencing based Chromosomal Abnormality Detection] with MC	12000	12000	12000
KLO25-4827	Med Amniotic Fluid karyotyping + FISH (5 probes - 13,18,21, sex chromosome)	11500	11500	11500
KLO25-4828	Med Amniotic Fluid karyotyping only	7000	7000	7000
KLO25-4829	Med Aneuploidy by QF PCR [with MCC]	6400	6400	6400
KLO25-4830	Med BCR-ABL quantitative (International Scale) gene fusion analysis	6400	6400	6400
KLO25-4831	Med Carrier screening - Gold[500 genes NGS & MLPA (SMA, CYP21A2)]	47000	47000	47000
KLO25-4832	Med Carrier screening - Platinum[~2000 recessive genes & MLPA (SMA, CYP21A2)]	49400	49400	49400
KLO25-4833	Med Carrier screening - Silver[100 genes NGS & MLPA (SMA, CYP21A2)]	39000	39000	39000
KLO25-4834	Med Chromosomal Microarray - Affymetrix Cytoscan 750K genechip	27000	27000	27000
KLO25-4835	Med Chromosomal Microarray - Affymetrix Cytoscan Optima low resolution genechip	16000	16000	16000
KLO25-4836	Med Claria NIPT Twins	17600	17600	17600

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4837	Med Claria-NIPT	12400	12400	12400
KLO25-4838	Med Claria-NIPT Advanced	15200	15200	15200
KLO25-4839	Med Clinical exome (80-100x)	16200	16200	16200
KLO25-4840	Med Comprehensive Hereditary Cancer Gene Panel (SNVs, InDels & Large Deletions/Duplications)	18800	18800	18800
KLO25-4841	Med Comprehensive Myeloid and Lymphoid Panel by NGS (SNVs, InDels, CNVs & Fusions)	26000	26000	26000
KLO25-4842	Med Cystic fibrosis (CFTR) gene analysis	11800	11800	11800
KLO25-4843	Med DNA Extraction and Storage	1000	1000	1000
KLO25-4844	Med Duchenne Muscular Dystrophy (DMD) deletion/duplication analysis	10400	10400	10400
KLO25-4845	Med ExomeMAX (Enhanced Whole Exome +Mitochondrial Genome Sequencing)	24400	24400	24400
KLO25-4846	Med FISH for Chronic Lymphoid Leukemia (CLL) Panel - 5 markers (del6q, del11q -ATM del, Trisomy 12, del13q, de	12800	12800	12800
KLO25-4847	Med FISH for Multiple Myeloma (MM) [with Plasma Enrichment] -6 Markers with CKS1B (1q gain/amplification)	17800	17800	17800
KLO25-4848	Med Hereditary cancer gene panel	12000	12000	12000
KLO25-4849	Med KaryoSeq [Low Pass Whole Genome Sequencing based Chromosomal Abnormality Detection] for Prenatal Spec	9000	9000	9000
KLO25-4850	Med KaryoSeq [Low Pass Whole Genome Sequencing based Chromosomal Abnormality Detection] with Prenatal Ce	10000	10000	10000
KLO25-4851	Med KaryoTrack [SNP based Chromosomal Microarray]	22000	22000	22000
KLO25-4852	Med Karyotyping (Non-Leukemia)	2800	2800	2800
KLO25-4853	Med Leukemia Panel (SNVs, small INDELs and CNVs) by NGS	8400	8400	8400
KLO25-4854	Med Maternal Cell Contamination (MCC) check in prenatal DNA	5800	5800	5800
KLO25-4855	Med MCC [REFLEX] with Chromosomal Microarray - Affymetrix Cytoscan Optima low resolution genechip	19600	19600	19600
KLO25-4856	Med Non-Invasive Fetal Rhesus (RhD) Genotyping	19200	19200	19200
KLO25-4857	Med POC-1st trimester	6750	6750	6750
KLO25-4858	Med POC-2nd trimester	6750	6750	6750
KLO25-4859	Med Rapid Exome Sequencing	41400	41400	41400
KLO25-4860	Med TORCH panel	10000	10000	10000
KLO25-4861	Med Whole exome sequencing (80-100x)	23000	23000	23000
KLO25-4862	MEDULLARY THYROID CARCINOMA MUTATION DETECTION	17600	17600	17600
KLO25-4863	MEGALENCEPHALIC LEUKOENCEPHALOPATHY WITH SUBCORTICAL CYSTS 1 (MLC1) HOT SPOT MUTATIO	17500	17500	17500
KLO25-4864	MELANIN	2450	2450	2450
KLO25-4865	MELANOMA - THERANOSTIC PANEL (M)	36000	36000	36000
KLO25-4866	MELANOMA, BRAF V600 MUTATION	14940	14940	14940
KLO25-4867	MELAS-MITOCHONDRIAL ENCEPHALOPATHY & LACTIC ACIDOSIS WITH STROKE LIKE SYNDROME,)MUTAT	7200	7200	7200
KLO25-4868	MELATONIN, SERUM	3000	3000	3000
KLO25-4869	MEMBRANOUS GLOMERULOPATHY (MGN) - TARGET 4 ANTIGEN PANEL	6500	6500	6500
KLO25-4870	MEMBRANOUS GLOMERULOPATHY (MGN) - TARGET 5 ANTIGEN PANEL	7600	7600	7600
KLO25-4871	ME-MITOCHONDRIAL ENCEPHALOPATHY DISEASE MUTATION DETECTION, BLOOD PCR	33000	33000	33000
KLO25-4872	MENINGITIS (ASEPTIC) PANEL, COMPREHENSIVE	9500	9500	9500
KLO25-4873	MENINGITIS PANEL IGG	5020	5020	5020
KLO25-4874	MENINGITIS PANEL IGM	5020	5020	5020
KLO25-4875	MENINGITIS PANEL, PCR	17000	17000	17000
KLO25-4876	MENINGITIS PANEL, PCR .14 BACTERIA+3 FUNGI	20000	20000	20000
KLO25-4877	MENINGO ENCEPHALITIS PANEL -5	14000	14000	14000
KLO25-4878	MENKES DISEASE (ATP7A) DELETION/DUPLICATION ANALYSIS (M)	25000	25000	25000
KLO25-4879	MENKES DISEASE (ATP7A) GENE ANALYSIS (M)	17000	17000	17000
KLO25-4880	MENNORHAGIA SCREEN	5000	5000	5000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4881	MENOPAUSAL SCREENING PANEL	3200	3200	3200
KLO25-4882	MENOPAUSE PLUS PROFILE	36000	36000	36000
KLO25-4883	MENORRHGIA, SCREEN	5000	5000	5000
KLO25-4884	MEPHOBARBITAL (MEBARAL)	800	800	800
KLO25-4885	MERCURY	3500	3500	3500
KLO25-4886	MERCURY, 24 HRS. URINE	3500	3500	3500
KLO25-4887	MERCURY, URINE RANDOM	3500	3500	3500
KLO25-4888	MERRF (MYOCLONIC EPILEPSY ASSOCIATED WITH RAGGED RED FIBRES) MUTATION DETECTION, BLOOD	14100	14100	14100
KLO25-4889	MESO- miRview™	85000	85000	85000
KLO25-4890	MESORIDAZINE (SERENTIL)	5600	5600	5600
KLO25-4891	METABOLIC DISORDER (BS)	42000	42000	42000
KLO25-4892	METABOLIC DISORDER PANEL, URINE	12000	12000	12000
KLO25-4893	METABOLIC DISORDER SCREEN	3500	3500	3500
KLO25-4894	METABOLIC DISORDER SCREEN INBORN, METABOLISM	3500	3500	3500
KLO25-4895	METABOLIC GENE PANEL	18000	18000	18000
KLO25-4896	METABOLIC SCREEN, URINE BASIC	560	560	560
KLO25-4897	METABOLOIC COMPREHENSIVE, URINE	1600	1600	1600
KLO25-4898	METACHROMATIC LEUCODYSTROPHY QUANTITATIVE	2100	2100	2100
KLO25-4899	METACHROMATIC LEUKODYSTROPHY GENE PANEL (M)	36000	36000	36000
KLO25-4900	METAL SCREEN -1, SERUM	5750	5750	5750
KLO25-4901	METAL SCREEN -2, WHOLE BLOOD	11000	11000	11000
KLO25-4902	METAL SCREEN -3 , URINE	15100	15100	15100
KLO25-4903	METAL SCREEN, PLASMA	1500	1500	1500
KLO25-4904	METANEPHRINE (HPLC), 24 HRS. URINE	6500	6500	6500
KLO25-4905	METANEPHRINE FREE PLASMA	6500	6500	6500
KLO25-4906	METANEPHRINE RANDON (NORMETANEPHRINE), URINE	6500	6500	6500
KLO25-4907	METANEPHRINE, FRACTIONED PLASMA	6500	6500	6500
KLO25-4908	METANEPHRINES, FRACTIONATED,24-HOUR URINE	6500	6500	6500
KLO25-4909	METASTASIS OF UNKNOWN ORIGIN	8000	8000	8000
KLO25-4910	METATASTIC TUMOUR BREAST	5500	5500	5500
KLO25-4911	METFORMIN	15810	15810	15810
KLO25-4912	METHADONE, URINE	800	800	800
KLO25-4913	METHAEMOGLOBIN ESTIMATION	1000	1000	1000
KLO25-4914	METHAMPHETAMINE, URINE	800	800	800
KLO25-4915	METHAQUALONE, URINE	700	700	700
KLO25-4916	METHEMOGLOBINEMIA (CYB5R3) GENE ANALYSIS (M)	30000	30000	30000
KLO25-4917	METHIOINE SCREEN, SERUM OR URINE	7500	7500	7500
KLO25-4918	METHLMALONIC ACID	9670	9670	9670
KLO25-4919	METHOTREXATE	2900	2900	2900
KLO25-4920	METHYLEMETETRAHYDROFOLATE REDUCTASE, (MTHFR) DNA MUTATION ANALYSIS	9000	9000	9000
KLO25-4921	METHYLGUANINE METHYLTRANSFERASE (MGMT)	8400	8400	8400
KLO25-4922	METHYLMALONIC ACID (REULITATIVE URINE)	250	250	250
KLO25-4923	METHYLMALONIC ACID, QUALITITATIVE	600	600	600
KLO25-4924	METHYLMALONIC ACID, QUANTITATIVE, SERUM	9670	9670	9670

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4925	METHYLMALONIC ACID, QUANTITATIVE, SERUM .(M)	2200	2200	2200
KLO25-4926	METHYLMALONIC ACID, QUANTITATIVE, SERUM.(L)	2200	2200	2200
KLO25-4927	METHYLMALONIC ACID, QUANTITATIVE, URINE	2200	2200	2200
KLO25-4928	METHYLMALONIC ACIDURIA (MMA) GENE PANEL (M)	33000	33000	33000
KLO25-4929	METYRAPONE STIMULATION TEST FOR CORTISOL & 11 DEOXYCORTISOL	14320	14320	14320
KLO25-4930	METYRAPONE STIMULATION TEST FOR CORTISOL & ACTH 11 DEOXYCORTISOL	14320	14320	14320
KLO25-4931	MEXILETINE	9590	9590	9590
KLO25-4932	MGMT BY PCR	9100	9100	9100
KLO25-4933	MGMT GENE METHYLATION ANALYSIS (TEMOZOLOMIDE RESISTANCE) (M)	10000	10000	10000
KLO25-4934	MGMT METHYLATION ASSAY (BS)	8400	8400	8400
KLO25-4935	MI (Molecular Intelligence) Tumor Seek	400000	400000	400000
KLO25-4936	MI (Molecular Intelligence) Profile	500000	500000	500000
KLO25-4937	MIB 1	14080	14080	14080
KLO25-4938	MIC TESTING FOR RAPIDLY GROWING MYCOBACTERIA	10000	10000	10000
KLO25-4939	MICM (MATERNALLY INHERITED CARDIOMYOPATHY) BY PCR	8400	8400	8400
KLO25-4940	MICROARRAY (HIGH RESOLUTION 750 K) + FISH -L	25000	25000	25000
KLO25-4941	MICROARRAY (HIGH RESOLUTION 750 K) -L	20000	20000	20000
KLO25-4942	MICROARRAY (LOW RESOLUTION 315 K) -L	15000	15000	15000
KLO25-4943	Microarray + DNA Storage + GC	20000	20000	20000
KLO25-4944	MICROARRAY FOR CHROMOSOMAL ABNORMALITY (180K) (BS)	21500	21500	21500
KLO25-4945	MICROARRAY FOR CHROMOSOMAL ABNORMALITY (315 K) (BS) .	12500	12500	12500
KLO25-4946	MICROARRAY FOR CHROMOSOMAL ABNORMALITY (350 K) (BS)	24000	24000	24000
KLO25-4947	MICROARRAY FOR CHROMOSOMAL ABNORMALITY (60 K) (BS)	13500	13500	13500
KLO25-4948	MICROARRAY FOR CHROMOSOMAL ABNORMALITY(750K) (BS)	21000	21000	21000
KLO25-4949	MICROCEPHALY GENE PANEL (BS)	42000	42000	42000
KLO25-4950	MICROCEPHALY GENE PANEL (M)	17000	17000	17000
KLO25-4951	MICRODELETION PANEL + SUBTELOMERIC DELETION/DUPLICATION PANEL (BS)	21600	21600	21600
KLO25-4952	MICRODELETION SYNDROME (BS)	8400	8400	8400
KLO25-4953	MICRODELETION SYNDROME PANEL + SUBTELOMERIC DELETION/DUPLICATION PANEL (BS)	14400	14400	14400
KLO25-4954	MICROFILARIA, QBC	300	300	300
KLO25-4955	MICROMETASTASIS DETECTION IN LYMPHNODES	11550	11550	11550
KLO25-4956	MICRONUTRIENT DEFICIENCY SCREEN	4300	4300	4300
KLO25-4957	MICROPHTHALMIA AND ANOPHTHALMIA GENE PANEL (M)	17000	17000	17000
KLO25-4958	MICROSATELLITE INSTABILITY (MSI),HNPCC	15260	15260	15260
KLO25-4959	MICROSATELLITE STABILITY INDEX(MSI ANALYSIS)	27500	27500	27500
KLO25-4960	MICROSCOPY ELECTRON	7600	7600	7600
KLO25-4961	MICROSPORIDIA SPORE DETECTION	500	500	500
KLO25-4962	MILLER-DIEKER CHROMOSOME REGION PROBE (MDS)	6000	6000	6000
KLO25-4963	MINIMAL RESIDUAL DISEASE (MRD) ANALYSIS FOR B-ALL	11200	11200	11200
KLO25-4964	Minimal Residual Disease (MRD) Analysis: T ALL	14600	14600	14600
KLO25-4965	MINIMAL RESIDUAL DISEASE (MRD) MONITORING FOR B-CLL	13000	13000	13000
KLO25-4966	MINIMAL RESIDUAL DISEASE (MRD) MONITORING FOR MULTIPLE MYELOMA	13000	13000	13000
KLO25-4967	MITOCHONDRIAL MUTATION COMPREHENSIVE.PANEL	24000	24000	24000
KLO25-4968	MITOCHONDRIAL MUTATION PANEL COMPREHENSIVE	42000	42000	42000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-4969	MITOCHONDRIAL MUTATION PANEL-1 (MELAS, MERRF, MM, MMC, ME, PEM, EI)	24000	24000	24000
KLO25-4970	MITOCHONDRIAL MUTATION PANEL-2 (LHON, NARP, CPEO, SNHL, DEAF, AMDF)	24000	24000	24000
KLO25-4971	MITOCHONDRIAL MUTATIONS PANEL-COMPREHENSIVE PANEL COVERING ALL 16 DISEASES	33000	33000	33000
KLO25-4972	MITOCHONDRIAL SEQUENCING - WHOLE MITOCHONDRIAL GENOME SEQUENCING	14000	14000	14000
KLO25-4973	MITOCHONDRIAL, REFLEX TO TITRE	2150	2150	2150
KLO25-4974	MITOXOME CLINICAL	32400	32400	32400
KLO25-4975	MIXING STUDIES - APTT	3000	3000	3000
KLO25-4976	MLH1 Hypermethylation	7100	7100	7100
KLO25-4977	MLH1 PROMOTER SEQUENCING AND DELETION DUPLICATION ANALYSIS	18000	18000	18000
KLO25-4978	MLH1 PROMOTER HYPERMETHYLATION	5000	5000	5000
KLO25-4979	MLPA for HBB Gene Sequencing	12000	12000	12000
KLO25-4980	MLPA For HBB gene-Individual	12000	12000	12000
KLO25-4981	MLPA-DMD (L)	12000	12000	12000
KLO25-4982	MM- MUTATION (MITOCHONDRIAL MYOPATHY) PCR	10200	10200	10200
KLO25-4983	MMC- MATERNAL MYOPATHY WITH CARDIOMYOPATHY MUTATION DETECTION	8400	8400	8400
KLO25-4984	MODIFIED ACID FAST STAIN - LEPROSY	700	700	700
KLO25-4985	MOLECULAR DETECTION OF Y MIRODELETION AZFA, AZFB, AZFC	3500	3500	3500
KLO25-4986	MOLECULAR KARYOTYPING (MKT)	12500	12500	12500
KLO25-4987	MONDINI DEFECT (SLC26A4) GENE ANALYSIS (M)	20000	20000	20000
KLO25-4988	MONOSPOT TEST (INFECTIOUS)	1300	1300	1300
KLO25-4989	M-PAL MUTATION DETECTION	7250	7250	7250
KLO25-4990	MPD PANEL (CYTOGENETICS AND JAK2)	8000	8000	8000
KLO25-4991	MPL (MYELOPROLIFERATIVE LEUKEMIA), GENE MUTATION	4900	4900	4900
KLO25-4992	MPL MUTATION DETECTION BY PCR	7250	7250	7250
KLO25-4993	MPN - CALR (EXON 9) GENE ANALYSIS (M)	5000	5000	5000
KLO25-4994	MPN - JAK2 V617F MUTATION ANALYSIS (M)	10000	10000	10000
KLO25-4995	MPN - MPL (EXON 10) GENE ANALYSIS (M)	10000	10000	10000
KLO25-4996	MPN PROGNOSTICATION AND RISK STRATIFICATION PANEL (M)	36000	36000	36000
KLO25-4997	MRSA SCREEN	900	900	900
KLO25-4998	MRSA SCREEN, PCR	2000	2000	2000
KLO25-4999	MS MLPA For Russel Silver-Methylation	12000	12000	12000
KLO25-5000	MSUD- MAPLE SYRUP URINE DISORDER -NEONATAL	450	450	450
KLO25-5001	MTHFR (METHYLTETRAHYDROFOLATE REDUCTASE) GENE MUTATION	6500	6500	6500
KLO25-5002	MTHFR (C677T, A1298C) (BS)	4800	4800	4800
KLO25-5003	MTHFR GENE ANALYSIS - 2 EXONS (5 & 8) (M)	6500	6500	6500
KLO25-5004	MTHFR GENE MUTATION (L)	3500	3500	3500
KLO25-5005	MTHFR, FACTOR V, FACTOR II (BS)	9600	9600	9600
KLO25-5006	MUCOPOLYSACCHARIDOSIS (MPS) SCREEN, URINE	390	390	390
KLO25-5007	MUCOPOLYSACCHARIDOSIS (MPS) TYPE 1 (HURLER), QUANTITATIVE, BLOOD	5100	5100	5100
KLO25-5008	MUCOPOLYSACCHARIDOSIS (MPS) TYPE VI (MAROTEAUX LAMY), QUANTITATIVE, BLOOD	1800	1800	1800
KLO25-5009	MUCOPOLYSACCHARIDOSIS (MPS) TYPING, 24 HOUR URINE	3790	3790	3790
KLO25-5010	MUCOPOLYSACCHARIDOSIS GENE PANEL (M)	36000	36000	36000
KLO25-5011	MUCOPOLYSACCHARIDOSIS IVA (GALNS) GENE ANALYSIS (M)	30000	30000	30000
KLO25-5012	MUCOR RACEMOSUS - SPECIFIC IGG	2300	2300	2300

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5013	MUCORALES SPECIES DETECTION (PCR)	6500	6500	6500
KLO25-5014	MULTIPLE EXOSTOSES (EXT1 & EXT2) DELETION DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-5015	MULTIPLE MYELOMA MONITORING PANEL	9200	9200	9200
KLO25-5016	MULTIPLE MYELOMA COMPREHENSIVE PROFILE	16200	16200	16200
KLO25-5017	MULTIPLE MYELOMA GENE PANEL (M)	33000	33000	33000
KLO25-5018	MULTIPLE MYELOMA SCREENING PANEL	8600	8600	8600
KLO25-5019	MULTIPLE MYELOMA, WORKUP PANEL	21750	21750	21750
KLO25-5020	MULTIPLE SCLEROSIS PANEL 1 IGG	7000	7000	7000
KLO25-5021	MULTIPLE SCLEROSIS PANEL 2 IGG	11750	11750	11750
KLO25-5022	MUMPS VIRUS ANTIBODIES PANEL, IGG & IGM	3300	3300	3300
KLO25-5023	MUMPS VIRUS IGG ANTIBODY	1800	1800	1800
KLO25-5024	MUMPS VIRUS IGM ANTIBODY	1800	1800	1800
KLO25-5025	MUMPS VIRUS, IgG, CSF	2500	2500	2500
KLO25-5026	MUSCLE SPECIFIC KINASE ANTIBODY (MUSK)	5900	5900	5900
KLO25-5027	MUSCLE SPECIFIC RECEPTOR(TYROSINE KINOSE) ANTBODY QUANTITATIVE(MuSK)	5900	5900	5900
KLO25-5028	MUSCULAR DYSTROPHY & CONGENITAL MYOPATHY GENE PANEL (M)	30000	30000	30000
KLO25-5029	MUSCULAR DYSTROPHY (BS)	42000	42000	42000
KLO25-5030	MY F4 (MYOGENIN)	2400	2400	2400
KLO25-5031	MYASTHENIA GRAVIS PANEL	10300	10300	10300
KLO25-5032	MYCOBACTERIUM LEPRAE DETECTION, SKIN	4000	4000	4000
KLO25-5033	MYCOBACTERIUM SPECIATION	3250	3250	3250
KLO25-5034	MYCOBACTERIUM SPECIATION – COMMON	6500	6500	6500
KLO25-5035	MYCOBACTERIUM SPECIATION – EXTENDED	6500	6500	6500
KLO25-5036	MYCOBACTERIUM TUBERCULOSIS (MTB), rRNA DETECTION, BAL	2500	2500	2500
KLO25-5037	MYCOBACTERIUM TUBERCULOSIS (MTB), rRNA DETECTION, BLOOD	2500	2500	2500
KLO25-5038	MYCOBACTERIUM TUBERCULOSIS (MTB), rRNA DETECTION, BODY FLUID	2500	2500	2500
KLO25-5039	MYCOBACTERIUM TUBERCULOSIS (MTB), rRNA DETECTION, CSF	2500	2500	2500
KLO25-5040	MYCOBACTERIUM TUBERCULOSIS (MTB), rRNA DETECTION, PUS	2500	2500	2500
KLO25-5041	MYCOBACTERIUM TUBERCULOSIS (MTB), rRNA DETECTION, SPUTUM	2500	2500	2500
KLO25-5042	MYCOBACTERIUM TUBERCULOSIS (MTB), rRNA DETECTION, TISSUE	2500	2500	2500
KLO25-5043	MYCOBACTERIUM TUBERCULOSIS (MTB), rRNA DETECTION, URINE	2500	2500	2500
KLO25-5044	MYCOBACTERIUM TUBERCULOSIS (MTB)-DNA DETECTION, BAL	2500	2500	2500
KLO25-5045	MYCOBACTERIUM TUBERCULOSIS (MTB)-DNA DETECTION, BLOOD	2500	2500	2500
KLO25-5046	MYCOBACTERIUM TUBERCULOSIS (MTB)-DNA DETECTION, BODY FLUID	2500	2500	2500
KLO25-5047	MYCOBACTERIUM TUBERCULOSIS (MTB)-DNA DETECTION, CSF	2500	2500	2500
KLO25-5048	MYCOBACTERIUM TUBERCULOSIS (MTB)-DNA DETECTION, PUS	2500	2500	2500
KLO25-5049	MYCOBACTERIUM TUBERCULOSIS (MTB)-DNA DETECTION, SPUTUM	2500	2500	2500
KLO25-5050	MYCOBACTERIUM TUBERCULOSIS (MTB)-DNA DETECTION, TISSUE	2500	2500	2500
KLO25-5051	MYCOBACTERIUM TUBERCULOSIS (MTB)-DNA DETECTION, URINE	2500	2500	2500
KLO25-5052	MYCOBACTERIUM TUBERCULOSIS BY TMA	2830	2830	2830
KLO25-5053	MYCOBACTERIUM TUBERCULOSIS, 1st LINE DRUG SENSITIVITY ASSAY,GENOTYPE	5060	5060	5060
KLO25-5054	MYCOBACTERIUM TUBERCULOSIS, 2nd LINE DRUG , GENOTYPE	5350	5350	5350
KLO25-5055	MYCOBACTERIUM TUBERCULOSIS, PCR; MYCOSURE; TB PCR	2830	2830	2830
KLO25-5056	MYCOPHENOLIC ACID	2000	2000	2000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5057	MYCOPLASMA - PNEUMONIAE IGG Ab	2200	2200	2200
KLO25-5058	MYCOPLASMA - PNEUMONIAE IGM Ab	2200	2200	2200
KLO25-5059	MYCOPLASMA PNEUMONIAE ANTIBODIES IGG & IGM, SERUM	3900	3900	3900
KLO25-5060	MYCOPLASMA PNEUMONIAE DNA, QUALITATIVE REAL-TIME PCR	13690	13690	13690
KLO25-5061	MYCOPLASMA-CULTURE	1200	1200	1200
KLO25-5062	MYD88 GENE L265P MUTATION ANALYSIS (M)	15000	15000	15000
KLO25-5063	MYELIN ASSOCIATED GLYCOPROTEIN SULFATED GLUCURONIC IGM	10300	10300	10300
KLO25-5064	MYELIN ASSOCIATED GLYCOPROTEIN, MAG IGM ANTIBODY	10300	10300	10300
KLO25-5065	MYELIN BASIC PROTEIN, MBP	7500	7500	7500
KLO25-5066	MYELODYSPLASIA PANEL - FLOWCYTOMETRY (M)	11000	11000	11000
KLO25-5067	MYELOMA PANEL - FLOWCYTOMETRY (M)	6000	6000	6000
KLO25-5068	MYELOPEROXIDASE (MPO) STAIN, BLOOD / BONE MARROW	450	450	450
KLO25-5069	MYELOPROLIFERATIVE NEOPLASIA (MPN) EXTENDED PROFILE	13000	13000	13000
KLO25-5070	MYELOPROLIFERATIVE NEOPLASIA WITH EOSINOPHILIA	16500	16500	16500
KLO25-5071	MYELOPROLIFERATIVE NEOPLASM (MPN) REFLEX PANEL (M)	15000	15000	15000
KLO25-5072	MYELOPROLIFERATIVE NEOPLASM PANEL (MYELOID NGS PANEL + BCR/ABL FISH +KARYOTYPING) (BS)	33600	33600	33600
KLO25-5073	MYOCARDITIS PANEL VIRAL IGM	4500	4500	4500
KLO25-5074	MYOCARDITIS PANEL, VIRAL IGG	4500	4500	4500
KLO25-5075	MYOGLOBIN	4300	4300	4300
KLO25-5076	MYOGLOBIN, SPOT URINE.	1500	1500	1500
KLO25-5077	MYOGLOBIN, URINE	1500	1500	1500
KLO25-5078	MYOSITIS PROFILE	8400	8400	8400
KLO25-5079	MYOSITIS PROFILE 11 ANTIGEN	8400	8400	8400
KLO25-5080	MYOSITIS PROFILE EXTENDED	15500	15500	15500
KLO25-5081	MYOTONIA CONGENITA (CLCN1) DELETION/DUPLICATION ANALYSIS (M)	25000	25000	25000
KLO25-5082	MYOTONIA CONGENITA GENE PANEL (M)	36000	36000	36000
KLO25-5083	MYOTONIC DYSTROPHY TYPE 1	6500	6500	6500
KLO25-5084	Myotonic Dystrophy - Type I (by TP-PCR)	12000	12000	12000
KLO25-5085	Myotonic Dystrophy - Type II (by TP-PCR)	12000	12000	12000
KLO25-5086	MYOTONIC DYSTROPHY COMPREHENSIVE PROFILE	8600	8600	8600
KLO25-5087	MYOTONIC DYSTROPHY DNA MUTATION ANALYSIS	32090	32090	32090
KLO25-5088	MYOTONIC DYSTROPHY TYPE 2	7000	7000	7000
KLO25-5089	NAAT CHEX TB+ NEUROCYSTICEROSIS	5700	5700	5700
KLO25-5090	N-ACETYL GLUCOSAMINE 6 SULPHATE SUPHATASE	6000	6000	6000
KLO25-5091	N-ACETYL GLUCOSAMINE TRANSFERASE	5500	5500	5500
KLO25-5092	NAFLD - PNPLA3 & TM6SF2 GENOTYPING	3800	3800	3800
KLO25-5093	NAFLD (NON ALCOHOLIC FATTY LIVER DISEASE) FIBROSIS	1000	1000	1000
KLO25-5094	NAPSIN-A	2130	2130	2130
KLO25-5095	NARP-NEUROGENIC ATAXIA RETINITIS, PIGMENTOSA,BLOOD PCR	8000	8000	8000
KLO25-5096	NATURAL KILLER CELL ACTIVITY	4200	4200	4200
KLO25-5097	NATURAL KILLER CELLS -BONE MARROW	5000	5000	5000
KLO25-5098	NBS GOLD	4500	4500	4500
KLO25-5099	NEFA, FREE FATT ACIDS	6000	6000	6000
KLO25-5100	NEIMANN PICK DISEASE-QUANTITATIVE BLOOD	2400	2400	2400

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5101	NEISSERIA GONORRHOEA DETECTION BY PCR, URETHRAL DISCHARGE	3800	3800	3800
KLO25-5102	NEISSERIA GONORRHOEAE PCR	3800	3800	3800
KLO25-5103	NEISSERIA MENINGITIDIS, ANTIGEN DETECTION	2800	2800	2800
KLO25-5104	NEONATAL SCREEN-I	900	900	900
KLO25-5105	NEONATAL SCREEN-II	1350	1350	1350
KLO25-5106	NEONATAL SCREEN-III	2300	2300	2300
KLO25-5107	NEONATAL SCREEN-IV	5200	5200	5200
KLO25-5108	NEOPTERIN	20100	20100	20100
KLO25-5109	NEPHROTIC SYNDROME PANEL (COMPREHENSIVE) - 11 GENES (M)	36000	36000	36000
KLO25-5110	NEPHROTIC SYNDROME PANEL (MINI) - 5 GENES (M)	36000	36000	36000
KLO25-5111	NEURO VIRUSES PANEL, QUALITATIVE PCR	6500	6500	6500
KLO25-5112	NEUROBLASTOMA PROFILE, 24 HRS. URINE	6500	6500	6500
KLO25-5113	NEUROBLASTOMA PROFILE, URINE RANDOM	9120	9120	9120
KLO25-5114	NEUROENDOCRINE MARKERS (CHROMOGRANIN, NSE, SYNAPTOPHYSIN)	5000	5000	5000
KLO25-5115	NEUROFIBROMATOSIS TYPE 1 (NF1) GENE ANALYSIS (M)	30000	30000	30000
KLO25-5116	NEUROFIBROMATOSIS TYPE 2 (NF2) DELETION/DUPLICATION ANALYSIS (M)	10000	10000	10000
KLO25-5117	NEUROFIBROMATOSIS TYPE 2 (NF2) GENE ANALYSIS (M)	30000	30000	30000
KLO25-5118	NEUROMETABOLIC DISORDER (MLC1, L2HGDH,D2HGDH, MLYCD) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-5119	Neuromuscular Disorders mtDNA mutation Panel	6500	6500	6500
KLO25-5120	NEUROMYELITIS OPTICA (NMO) AUTOANTIBODY IgG ...(USA)	64370	64370	64370
KLO25-5121	NEURON SPECIFIC ENOLASE	3500	3500	3500
KLO25-5122	NEURONAL (PARANEOPLASTIC) AUTOANTIBODIES PROFILE	10800	10800	10800
KLO25-5123	NEURONAL (PARANEOPLASTIC) AUTOANTIBODIES PROFILE, ADVANCED	12600	12600	12600
KLO25-5124	NEURONAL (PARANEOPLASTIC) AUTOANTIBODIES PROFILE, ULTRA	15600	15600	15600
KLO25-5125	NEURONAL ANTIBODY PROFILE, SERUM	10800	10800	10800
KLO25-5126	NEURONAL ANTIBODY PROFILE-1 PARANEOPLASTIC SYNDROME PROFLE 6	8000	8000	8000
KLO25-5127	NEURONAL ANTIBODY PROFILE-2 PARANEOPLASTIC SYNDROME PROFLE 9	13000	13000	13000
KLO25-5128	NEURONAL ANTIBODY PROFILE-3 PARANEOPLASTIC SYNDROME PROFLE 12	13000	13000	13000
KLO25-5129	NEURONAL CEROID LIPOFUSCINOSIS (CLN3, PPT1, TPP1) DEFICIENCY DELETION/DUPLICATION ANALYSIS	15000	15000	15000
KLO25-5130	NEURONAL CEROID LIPOFUSCINOSIS GENE PANEL (BS)	43200	43200	43200
KLO25-5131	NEURONAL CEROID LIPOFUSCINOSIS GENE PANEL (M)	33000	33000	33000
KLO25-5132	NEURONAL MIGRATION DISORDER GENE PANEL (M)	36000	36000	36000
KLO25-5133	NEUROTROPIC VITAMINS B COMPLEX PANEL	5400	5400	5400
KLO25-5134	NEUROVIRUSES COMPREHENSIVE PANEL, PCR QUALITATIVE	8100	8100	8100
KLO25-5135	NEW BORN SCREENING - 57 CONDITIONS	4750	4750	4750
KLO25-5136	NEWBORN SCREEN -111 CONDITIONS URINE	3500	3500	3500
KLO25-5137	NEWBORN SCREEN- 118 CONDITIONS -CORD BLOOD + URINE	4990	4990	4990
KLO25-5138	NEWBORN SCREEN- 119 CONDITIONS- HEEL PRICK+URINE	4990	4990	4990
KLO25-5139	NEWBORN SCREENING (HEEL PRICK)	1500	1500	1500
KLO25-5140	NEWBORN SCREENING - 53 CONDITIONS	3880	3880	3880
KLO25-5141	NEWBORN SCREENING (BLOOD)	1800	1800	1800
KLO25-5142	NEWBORN SCREENING -11 CONDITIONS (HEEL PRICK)	2400	2400	2400
KLO25-5143	NEWBORN SCREENING 3 CONDITION	750	750	750
KLO25-5144	NEWBORN SCREENING -47 CONDITIONS	2630	2630	2630

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5145	NEWBORN SCREENING -7 CONDITIONS (HEEL PRICK)	1500	1500	1500
KLO25-5146	NEWBORN SCREENING EXTENDED (BLOOD)	5400	5400	5400
KLO25-5147	NEWBORN SCREENING PANEL-1 (L)	550	550	550
KLO25-5148	NEWBORN SCREENING PANEL-2 (L)	660	660	660
KLO25-5149	NEWBORN SCREENING PANEL-3 (L)	1100	1100	1100
KLO25-5150	NEWBORN SCREENING PANEL-4 (L)	1100	1100	1100
KLO25-5151	NF1 DELETION/DUPLICATION ANALYSIS (M)	9000	9000	9000
KLO25-5152	NGAL -NEUTROPHIL GELATINASE ASSOCIATED LIPOCALIN, URINE	7600	7600	7600
KLO25-5153	NGS COLON PANEL	7500	7500	7500
KLO25-5154	NGS GASTRO PANEL *ERBB2, *KIT, *BRAF, *PDGFRA, *TP53	7500	7500	7500
KLO25-5155	NGS LUNG PANEL *MET, *KRAS, *BARF, ERBB2, *EGFR	7500	7500	7500
KLO25-5156	NGS NEURO PANEL *ATRX *TP53 * IDH 1 & 2 *PTEN *BRAF	7500	7500	7500
KLO25-5157	NICKEL, 24 HRS. URINE	3300	3300	3300
KLO25-5158	NICKEL, URINE RANDOM	3300	3300	3300
KLO25-5159	NICKEL..SERUM/BLOOD	3300	3300	3300
KLO25-5160	NICOTINE & COTININE , URINE	10400	10400	10400
KLO25-5161	NICOTINE METABOLITE QUALITATIVE, URINE	2300	2300	2300
KLO25-5162	NICOTINE METABOLITE, SERUM	2100	2100	2100
KLO25-5163	NICOTINE SCREEN,URINE	650	650	650
KLO25-5164	NIEMANN PICK DISEASE (NPC1, NPC2, SMPD1) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-5165	NIEMANN PICK DISEASE, QUANTITATIVE, BLOOD	2400	2400	2400
KLO25-5166	NIEMANN-PICK DISEASE GENE PANEL (M)	36000	36000	36000
KLO25-5167	NIESSERIA MENINGITIDIS A,B,C,Y W 135 ANTIGEN DETECTION	3800	3800	3800
KLO25-5168	NIPT - INSIGHT (MPSS) (L)	13000	13000	13000
KLO25-5169	NIPT (INSIGHT T 13,18,21 X & Y CONFIRMATION)	25000	25000	25000
KLO25-5170	NIPT (M)	15000	15000	15000
KLO25-5171	NIPT (TACS)	16000	16000	16000
KLO25-5172	NIPT + MICRODELETIONS (L)	20000	20000	20000
KLO25-5173	NIPT 10 ANEUPLOIDIES + 63 MICRODELETION(L) .	30000	30000	30000
KLO25-5174	NIPT PLUS (MED))	37000	37000	37000
KLO25-5175	NITROPUSSIDE TEST, URINE	130	130	130
KLO25-5176	NITROSONAPHTHOL TEST, URINE	130	130	130
KLO25-5177	NITROTYROSINE, PLASMA	2650	2650	2650
KLO25-5178	NMDA RECEPTOR ANTIBODY	7500	7500	7500
KLO25-5179	NMDA RECEPTOR ANTIBODY - CSF	7500	7500	7500
KLO25-5180	N-MID OSTIOCALCIN	3500	3500	3500
KLO25-5181	NMO ANTIBODIES	5400	5400	5400
KLO25-5182	NMO ANTIBODIES - CSF	7800	7800	7800
KLO25-5183	NMP - 22, URINE	8760	8760	8760
KLO25-5184	NMP 1 GENE MUTATION	4300	4300	4300
KLO25-5185	Nmyc GENE AMPLICATION NEUROBLASTOMA	7800	7800	7800
KLO25-5186	N-MYC AMPLIFICATION (M)	10000	10000	10000
KLO25-5187	NOCARDIA SPECIATION	6500	6500	6500
KLO25-5188	NOCARDIA STAIN	800	800	800

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5189	NON HODGKINS LYMPHOMA (NHL) IMMUNOPHENOTYPING	5500	5500	5500
KLO25-5190	NON SMALL CELL LUNG CANCER (NSCLC) NGS PANEL (HOT SPOT) (M)	36000	36000	36000
KLO25-5191	NON-IMMUNE HYDROPS GENE PANEL (M)	36000	36000	36000
KLO25-5192	NON-INVASIVE FETAL RHESUS (RhD) GENOTYPING	14700	14700	14700
KLO25-5193	NON-INVASIVE PRENATAL TESTING (YES-IN-GENE) (BS)	36000	36000	36000
KLO25-5194	NOONAN SYNDROME GENE PANEL (M)	36000	36000	36000
KLO25-5195	NOR EPINEPHRINE (NOR ADRENALINE),PLASMA	2900	2900	2900
KLO25-5196	NOR-EPINEPHRINE (NOR ADRENALINE),24 HOUR	2900	2900	2900
KLO25-5197	NORETHINDRONE	8660	8660	8660
KLO25-5198	NORTRIPTYLINE	9000	9000	9000
KLO25-5199	NOTCH 3 GENE BY SEQUENCING CADASIL 5 EXONS	26000	26000	26000
KLO25-5200	NOTCH3 (CADASIL) GENE ANALYSIS (M)	33000	33000	33000
KLO25-5201	NOTCH3 (CADASIL) GENE ANALYSIS -2 EXONS (2 & 3) (M)	10800	10800	10800
KLO25-5202	NPM1 GENE ANALYSIS (HOT SPOT - EXON 12) (M)	8000	8000	8000
KLO25-5203	NPM1 MUTATION	4000	4000	4000
KLO25-5204	NRAS GENE ANALYSIS (HOT SPOT) (M)	8000	8000	8000
KLO25-5205	NRAS MUTATION EXONS 1 & 2, TISSUE	6200	6200	6200
KLO25-5206	NRAS MUTATION CODON, 12,13 & 61	6700	6700	6700
KLO25-5207	NSE-NEURON SPECIFIC ENOLASE, CSF	3200	3200	3200
KLO25-5208	NTX N - TELLOPEPTIDE , 24 HOURS URINE	2900	2900	2900
KLO25-5209	NUCLEAR MATRIX PROTEIN, NMP	16000	16000	16000
KLO25-5210	NutriEVAL	65000	65000	65000
KLO25-5211	Nutrition & Fitness Genomics	15000	15000	15000
KLO25-5212	NUTRITIONAL ANEMIA PANEL	3200	3200	3200
KLO25-5213	Nx GEN CARRIER SEQUENCING	35000	35000	35000
KLO25-5214	Nx Gen Clinical Exome Sequencing - Illumina	25400	25400	25400
KLO25-5215	Nx Gen Clinical Exome Sequencing - Thermofisher	23500	23500	23500
KLO25-5216	Nx GEN CLINICAL EXOME SEQUENCING, ADVANCED	25000	25000	25000
KLO25-5217	Nx GEN CLINICAL EXOME SEQUENCING, BASIC	24000	24000	24000
KLO25-5218	Nx GEN CLINICAL EXOME SEQUENCING, REFLEX CONFIRMATION WITH PARENTS	30000	30000	30000
KLO25-5219	Nx GEN SEQ, DEMENTIA	20000	20000	20000
KLO25-5220	Nx GEN SEQ, FAMILIAL HEMIPLEGIC MIGRAINE	20000	20000	20000
KLO25-5221	Nx Gen Seq, 4H syndrome	20000	20000	20000
KLO25-5222	Nx Gen Seq, Adrenoleukodystrophy	20000	20000	20000
KLO25-5223	Nx Gen Seq, Aicardi-Goutieres syndrome	20000	20000	20000
KLO25-5224	Nx Gen Seq, Albinism	24500	24500	24500
KLO25-5225	Nx Gen Seq, Alexander disease	20000	20000	20000
KLO25-5226	Nx Gen Seq, Alkaptonuria	20000	20000	20000
KLO25-5227	Nx Gen Seq, Alzheimer disease	20000	20000	20000
KLO25-5228	Nx GEN SEQ, AMYOTROPHIC LATERAL SCLEROSIS	20000	20000	20000
KLO25-5229	Nx GEN SEQ, ATAXIA-TELANGIECTASIA	20000	20000	20000
KLO25-5230	Nx GEN SEQ, BETHLEM MYOPATHY, MYOFIBRILLAR MYOPATHY & ULLRICH MUSCULAR DYSTROPHY	20000	20000	20000
KLO25-5231	Nx GEN SEQ, CANAVAN DISEASE	20000	20000	20000
KLO25-5232	Nx Gen Seq, Cataract	24500	24500	24500

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5233	Nx GEN SEQ, CHARCOT-MARIE-TOOTH DISEASE & SENSORY NEUROPATHIES	20000	20000	20000
KLO25-5234	Nx GEN SEQ, COMPREHENSIVE EPILEPSY	20000	20000	20000
KLO25-5235	Nx Gen Seq, Corneal Dystrophy	24500	24500	24500
KLO25-5236	Nx GEN SEQ, DRAVET'S SYNDROME & EARLY INFANTILE EPILEPTIC ENCEPHALOPATHY	20000	20000	20000
KLO25-5237	Nx GEN SEQ, DUCHENNE & BECKER MUSCULAR DYSTROPHY For MLPA negative cases	20000	20000	20000
KLO25-5238	Nx GEN SEQ, DYSTONIA	20000	20000	20000
KLO25-5239	NX GEN SEQ, EPISODIC ATAXIA	20000	20000	20000
KLO25-5240	Nx Gen Seq, Glaucoma	24500	24500	24500
KLO25-5241	Nx Gen Seq, Hereditary Retinoblastoma	24500	24500	24500
KLO25-5242	Nx Gen Seq, Leber congenital amaurosis	24500	24500	24500
KLO25-5243	Nx GEN SEQ, MEGALOENCEPHALIC LEUKOENCEPHALOPATHY WITH SUBCORTICAL CYSTS	20000	20000	20000
KLO25-5244	Nx Gen Seq, Microphthalmia/Anophthalmia/Coloboma spectrum	24500	24500	24500
KLO25-5245	Nx Gen Seq, Ophthalmoplegia	24500	24500	24500
KLO25-5246	Nx Gen Seq, Optic atrophy	24500	24500	24500
KLO25-5247	Nx Gen Seq, Retinitis Pigmentosa	24500	24500	24500
KLO25-5248	Nx Gen Seq, Usher syndrome	24500	24500	24500
KLO25-5249	NX GEN SEQUENCING - ATAXIA NGS PANEL	20000	20000	20000
KLO25-5250	NX GEN SEQUENCING - AUTISM NGS PANEL	21600	21600	21600
KLO25-5251	NX GEN SEQUENCING - AUTISM/ADHD FULL SPECTRUM NGS PANEL	21600	21600	21600
KLO25-5252	NX GEN SEQUENCING - AUTISM/ADHD NGS PANEL	21600	21600	21600
KLO25-5253	NX GEN SEQUENCING - BRADYKINESIA NGS PANEL	21600	21600	21600
KLO25-5254	NX GEN SEQUENCING - BRAIN MUSCLE CHANNELOPATHIES NGS PANEL	21600	21600	21600
KLO25-5255	NX GEN SEQUENCING - CHARCOT-MARIE-TOOTH / DEMYELINATING NEUROPATHY NGS PANEL	21600	21600	21600
KLO25-5256	NX GEN SEQUENCING - CHRONIC PROGRESSIVE EXTERNAL OPHTHALMOPLEGIA NGS PANEL	21600	21600	21600
KLO25-5257	NX GEN SEQUENCING - COGNITIVE IMPAIRMENT NGS PANEL	21600	21600	21600
KLO25-5258	NX GEN SEQUENCING - COMPREHENSIVE MOVEMENT DISORDERS NGS PANEL	21600	21600	21600
KLO25-5259	NX GEN SEQUENCING - DEMENTIA NGS PANEL	21600	21600	21600
KLO25-5260	NX GEN SEQUENCING - DEVELOPMENTAL DELAY NGS PANEL	21600	21600	21600
KLO25-5261	NX GEN SEQUENCING - DEVELOPMENTAL DELAY/AUTISM/ASD NGS PANEL	21600	21600	21600
KLO25-5262	NX GEN SEQUENCING - DYSTONIA NGS PANEL	21600	21600	21600
KLO25-5263	NX GEN SEQUENCING - EPILEPSY COMPREHENSIVE & EPILEPTIC ENCEPHALOPATHY NGS PANEL	21600	21600	21600
KLO25-5264	NX GEN SEQUENCING - FREQUENT FALLS NGS PANEL	21600	21600	21600
KLO25-5265	NX GEN SEQUENCING - GENETIC NEUROLOGICAL CHANNELOPATHIES NGS PANEL	21600	21600	21600
KLO25-5266	NX GEN SEQUENCING - HEADACHE NGS PANEL	21600	21600	21600
KLO25-5267	NX GEN SEQUENCING - HEREDITARY INCLUSION MYOPATHY NGS PANEL	21600	21600	21600
KLO25-5268	NX GEN SEQUENCING - HEREDITARY MOTOR NEUROPATHY NGS PANE	21600	21600	21600
KLO25-5269	NX GEN SEQUENCING - HEREDITARY SENSORY AND MOTOR NEUROPATHY NGS PANEL	21600	21600	21600
KLO25-5270	NX GEN SEQUENCING - HYPOKALEMIC AND PERIODIC PARALYSIS NGS PANEL	21600	21600	21600
KLO25-5271	NX GEN SEQUENCING - IDIOPATHIC BASAL GANGLIA CALCIFICATION NGS PANEL	21600	21600	21600
KLO25-5272	NX GEN SEQUENCING - LISSENCEPHALY NGS PANEL	21600	21600	21600
KLO25-5273	NX GEN SEQUENCING - MICROCEPHALY AND PONTOCEREBELLAR HYPOPLASIA NGS PANEL	21600	21600	21600
KLO25-5274	NX GEN SEQUENCING - MOTOR NEURON DISEASE NGS PANEL	21600	21600	21600
KLO25-5275	NX GEN SEQUENCING - NEURODEGENERATION WITH BRAIN IRON ACCUMULATION (NBIA) AND INFANTILE N	21600	21600	21600
KLO25-5276	NX GEN SEQUENCING - NEURODEGENERATION WITH BRAIN IRON ACCUMULATION (NBIA) NGS PANEL	21600	21600	21600

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5277	NX GEN SEQUENCING - NEURODEGENERATIVE NGS PANEL	21600	21600	21600
KLO25-5278	NX GEN SEQUENCING - NEUROMUSCULAR NGS PANEL	21600	21600	21600
KLO25-5279	NX GEN SEQUENCING - NEURO-OPTHALMOLOGY NGS PANEL	21600	21600	21600
KLO25-5280	NX GEN SEQUENCING - NON KETOTIC HYPERGLYCEMIA/GLYCINE ENCEPHALOPATHY NGS PANEL	21600	21600	21600
KLO25-5281	NX GEN SEQUENCING - ORGANIC ACIDURIA NGS PANEL	21600	21600	21600
KLO25-5282	NX GEN SEQUENCING - PARKINSON'S DISEASE NGS PANEL	21600	21600	21600
KLO25-5283	NX GEN SEQUENCING - PARKINSON'S-DEMENTIA-ALZHEIMER'S NGS PANEL	21600	21600	21600
KLO25-5284	NX GEN SEQUENCING - SLEEP DISTURBANCE NGS PANEL	21600	21600	21600
KLO25-5285	NX GEN SEQUENCING - SPASTIC PARAPLEGIA NGS PANEL	21600	21600	21600
KLO25-5286	NX GEN SEQUENCING - STRUCTURAL BASAL GANGLIA DISORDERS NGS PANEL	21600	21600	21600
KLO25-5287	NX GEN SEQUENCING - TREMORS NGS PANEL	21600	21600	21600
KLO25-5288	NX GEN SEQUENCING - WHITE MATTER DISORDERS NGS PANEL	21600	21600	21600
KLO25-5289	NX GEN SEQUENCING - X-LINKED DISORDERS/AUTISM NGS PANEL	21600	21600	21600
KLO25-5290	NX GEN SEQUENCING CHARCOT-MARIE-TOOTH NGS PANEL	21600	21600	21600
KLO25-5291	NX GEN SEQUENCING -COMPREHENSIVE BRAIN MALFORMATIONS NGS PANEL	21600	21600	21600
KLO25-5292	NX GEN SEQUENCING -MITOCHONDRIAL EPILEPSY NGS PANEL	21600	21600	21600
KLO25-5293	NX GEN SEQUENCING: ALPORT SYNDROME PANEL	21600	21600	21600
KLO25-5294	NX GEN SEQUENCING: C3 GLOMERULOPATHY PANEL	21600	21600	21600
KLO25-5295	NX GEN SEQUENCING: COMPREHENSIVE INHERITED CHRONIC KIDNEY DISEASE PANEL	21600	21600	21600
KLO25-5296	NX GEN SEQUENCING: COMPREHENSIVE RENAL PANEL	21600	21600	21600
KLO25-5297	NX GEN SEQUENCING: CYSTIC KIDNEY DISEASE PANEL	21600	21600	21600
KLO25-5298	NX GEN SEQUENCING: EYE MOVEMENT DISORDERS PANEL	21600	21600	21600
KLO25-5299	NX GEN SEQUENCING: GLOMERULAR PROTEINURIA PANEL	21600	21600	21600
KLO25-5300	NX GEN SEQUENCING: HEREDITARY ATYPICAL HEMOLYTIC UREMIA SYNDROME PANEL	21600	21600	21600
KLO25-5301	NX GEN SEQUENCING: HEREDITARY FEMALE INFERTILITY PANEL	21600	21600	21600
KLO25-5302	NX GEN SEQUENCING: HEREDITARY FETAL DEVELOPMENTAL CONCERNS PANEL	21600	21600	21600
KLO25-5303	NX GEN SEQUENCING: HEREDITARY GLOMERULONEPHRITIS PANEL	21600	21600	21600
KLO25-5304	NX GEN SEQUENCING: HEREDITARY HYPEROXALURIA PANEL	21600	21600	21600
KLO25-5305	NX GEN SEQUENCING: HEREDITARY HYPOGONADOTROPIC HYPOGONADISM PANEL	21600	21600	21600
KLO25-5306	NX GEN SEQUENCING: HEREDITARY HYPOMAGNESEMIA PANEL	21600	21600	21600
KLO25-5307	NX GEN SEQUENCING: HEREDITARY IGA NEPHROPATHY PANEL	21600	21600	21600
KLO25-5308	NX GEN SEQUENCING: HEREDITARY INFERTILITY (MALE & FEMALE) PANEL	21600	21600	21600
KLO25-5309	NX GEN SEQUENCING: HEREDITARY MALE INFERTILITY PANEL	21600	21600	21600
KLO25-5310	NX GEN SEQUENCING: HEREDITARY MORPHOLOGICAL ABNORMALITIES OF SPERM FLAGELLA PANEL	21600	21600	21600
KLO25-5311	NX GEN SEQUENCING: HEREDITARY NEPHROCALCINOSIS PANEL	21600	21600	21600
KLO25-5312	NX GEN SEQUENCING: HEREDITARY NEPHROGENIC DIABETES INSIPIDUS PANEL	16500	16500	16500
KLO25-5313	NX GEN SEQUENCING: HEREDITARY NEPHROLITHIASIS PANEL	21600	21600	21600
KLO25-5314	Nx GEN SEQUENCING: HEREDITARY NEUROPATHY PANEL	21600	21600	21600
KLO25-5315	NX GEN SEQUENCING: HEREDITARY OLIGOSPERMIA/AZOOSPERMIA PANEL	21600	21600	21600
KLO25-5316	NX GEN SEQUENCING: HEREDITARY OOCYTE MATURATION DEFECT/EMBRYONIC ARREST PANEL	21600	21600	21600
KLO25-5317	NX GEN SEQUENCING: HEREDITARY ORGANIC ACIDEMIAS PANEL	21600	21600	21600
KLO25-5318	NX GEN SEQUENCING: HEREDITARY PREMATURE OVARIAN INSUFFICIENCY PANEL	21600	21600	21600
KLO25-5319	NX GEN SEQUENCING: HEREDITARY RENAL CANCER PANEL	21600	21600	21600
KLO25-5320	NX GEN SEQUENCING: HEREDITARY RENAL HEMATURIA PANEL	21600	21600	21600

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5321	NX GEN SEQUENCING: HEREDITARY TERATOASTHENOZOOSPERMIA PANEL	21600	21600	21600
KLO25-5322	NX GEN SEQUENCING: HYPOKALEMIA AND RELATED DISORDERS PANEL	21600	21600	21600
KLO25-5323	NX GEN SEQUENCING: LEIGH SYNDROME PANEL	21600	21600	21600
KLO25-5324	NX GEN SEQUENCING: LEUKODYSTROPHY/LEUKOENCEPHALOPATHY PANEL	21600	21600	21600
KLO25-5325	NX GEN SEQUENCING: LOSS OF PREGNANCY PANEL	21600	21600	21600
KLO25-5326	NX GEN SEQUENCING: MATURITY ONSET DIABETES OF YOUNG (MODY) DISEASE	25400	25400	25400
KLO25-5327	NX GEN SEQUENCING: NEPHROTIC SYNDROME/ FOCAL SEGMENTAL GLOMERULOSCLEROSIS PANEL	21600	21600	21600
KLO25-5328	NX GEN SEQUENCING: NEUROMETABOLIC DISORDERS PANEL	21600	21600	21600
KLO25-5329	NX GEN SEQUENCING: POLYCYSTIC OVARY SYNDROME PANEL	21600	21600	21600
KLO25-5330	NX GEN SEQUENCING: PREMATURE OVARIAN FAILURE PANEL	21600	21600	21600
KLO25-5331	NX GEN SEQUENCING: PROTEINURIC RENAL DISEASE PANEL	21600	21600	21600
KLO25-5332	NX GEN SEQUENCING: RECURRENT HYDATIFORM MOLE PANEL	21600	21600	21600
KLO25-5333	NX GEN SEQUENCING: RENAL TUBULAR ACIDOSIS PANEL	21600	21600	21600
KLO25-5334	NX GEN SEQUENCING: RENAL TUBULOPATHY AND NEPHROLITHIASIS PANEL	21600	21600	21600
KLO25-5335	NX GEN SEQUENCING: SPASTIC PARAPLEGIA/SPASTICITY/NBIA (NEURODEGENERATION WITH BRAIN IRO	21600	21600	21600
KLO25-5336	NX GEN SEQUENCING: STEROID RESISTANT NEPHROTIC SYNDROME PANEL	21600	21600	21600
KLO25-5337	NX GEN TUBEROUS SCLEROSIS COMPLEX	25400	25400	25400
KLO25-5338	Nx Gen Whole Exome Sequencing - Illumina	45000	45000	45000
KLO25-5339	Nx Gen Whole Exome Sequencing - Thermofisher	32400	32400	32400
KLO25-5340	Nx GEN WHOLE EXOME SEQUENCING, TRIO Whole exome sequencing of Proband & both parents	75000	75000	75000
KLO25-5341	OBESITY PANEL	4900	4900	4900
KLO25-5342	OBESITY, PANEL (M)	5900	5900	5900
KLO25-5343	OBSTETRIC FLOW PANEL	5700	5700	5700
KLO25-5344	OCULOCUTANEOUS ALBINISM GENE PANEL (M)	36000	36000	36000
KLO25-5345	OLIGOCLONAL BANDS, IgG CSF	4500	4500	4500
KLO25-5346	OMEGA 3 & 6 FATTY ACID, PLASMA	3460	3460	3460
KLO25-5347	ONCO PRO COMPREHENSIVE MYELOID PANEL	41000	41000	41000
KLO25-5348	ONCOGENIC E6/E7 mRNA	3000	3000	3000
KLO25-5349	ONCOMINE ACUTE MYELOID LEUKAE	37800	37800	37800
KLO25-5350	ONCOMINE CHRONIC MYELOID LEUKA	37800	37800	37800
KLO25-5351	ONCOMINE CHRONIC MYELOMONOCYTI	37800	37800	37800
KLO25-5352	ONCOMINE COMPREHENSIVE MYELOID	41000	41000	41000
KLO25-5353	ONCOMINE JUVENILWE MYELOMONOCY	35000	35000	35000
KLO25-5354	ONCOMINE MYECO PROLIFERATIVE NEO PLASM (MPN) PANEL	37800	37800	37800
KLO25-5355	ONCOMINE MYELODYSPLASTIC (MDS)	37800	37800	37800
KLO25-5356	ONCOMINE MYELOPROLIFERATIVE NE	37800	37800	37800
KLO25-5357	ONCOPRECISE CGP (LI)	120000	120000	120000
KLO25-5358	ONCOPRO BRAF RAPID	27000	27000	27000
KLO25-5359	ONCOPRO CANCERTRACK MRD - FOLLOW UP PANEL	70400	70400	70400
KLO25-5360	ONCOPRO COLORECTAL CANCER SCREEN - CIRCULATING TUMOR CELLS	24000	24000	24000
KLO25-5361	ONCOPRO COMPREHENSIVE CANCER PANEL, 161 GENES	45400	45400	45400
KLO25-5362	ONCOPRO EGFR ARMS PCR	10300	10300	10300
KLO25-5363	ONCOPRO ENDOMETRIAL CANCER PANEL	32500	32500	32500
KLO25-5364	ONCOPRO FOCUS FUSION PANEL FOR SOLID TUMORS	37800	37800	37800

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5365	ONCOPRO HEREDITARY CANCER RISK (Screens 98 genes)	30200	30200	30200
KLO25-5366	ONCOPRO HEREDITARY CANCER RISK PANEL (SCREENS 200 GENES)	30200	30200	30200
KLO25-5367	ONCOPRO HOMOLOGOUS RECOMBINATION REPAIR - GERMLINE NGS PANEL	25000	25000	25000
KLO25-5368	ONCOPRO HOMOLOGOUS RECOMBINATION REPAIR - SOMATIC NGS PANEL	25000	25000	25000
KLO25-5369	ONCOPRO KRAS RAPID	22000	22000	22000
KLO25-5370	ONCOPRO LIQUID BIOPSY 73 Gene Panel with MSI	165000	165000	165000
KLO25-5371	ONCOPRO NCCN LUNG CANCER PANEL WITH PD-L1 (*7 Genes *MSI *PD-L1)	120000	120000	120000
KLO25-5372	ONCOPRO PANCANCER CTC PANEL - LIQUID BIOPSY	46600	46600	4600
KLO25-5373	ONCOPRO PANCANCER PANEL - LIQUIDBIOPSY	42250	42250	42250
KLO25-5374	ONCOPRO PROSTATE CANCER SCREEN	24000	24000	24000
KLO25-5375	ONCOPRO TARGET FOCUS LIQUID BIOPSY BY NGS	118800	118800	118800
KLO25-5376	ONCOPRO TMB & MSI PROFILE	64800	64800	64800
KLO25-5377	ONCOPRO TSO500 COMPREHENSIVE GENOMIC PROFILING	199999	199999	199999
KLO25-5378	ONCOPRO TUMOR MUTATION BURDEN (TMB)	64800	64800	64800
KLO25-5379	ONCOTRACK - ULTIMA [LIQUID BIOPSY FOR 56 THERANOSTIC GENES] (M)	50000	50000	50000
KLO25-5380	OPIATES CONFIRMATION, URINE	46500	46500	46500
KLO25-5381	OPIATES, SCREEN, RANDOM URINE	700	700	700
KLO25-5382	OPPORTUNISTIC ENTERIC PARASITE SCREEN, STOOL	840	840	840
KLO25-5383	OPPORTUNISTIC INFECTIONS, PANEL	1300	1300	1300
KLO25-5384	OPTIC ATROPHY GENE PANEL (M)	33000	33000	33000
KLO25-5385	ORGANIC ACID QUANTITATIVE RANDOM URINE FULL PANEL	3800	3800	3800
KLO25-5386	ORGANIC ACID URINE (M)	1500	1500	1500
KLO25-5387	ORGANIC ACIDEMIA GENE PANEL (M)	36000	36000	36000
KLO25-5388	ORNITHINE SCREEN, URINE	7500	7500	7500
KLO25-5389	ORNITHINE SCREEN, SERUM	7500	7500	7500
KLO25-5390	OROTIC ACID	3800	3800	3800
KLO25-5391	OSMOLAL GAP, ,SERUM	1100	1100	1100
KLO25-5392	OSTASE, SERUM	1500	1500	1500
KLO25-5393	OSTEOCALCIN SERUM (BONE Gla PROTEIN; BGP)	2900	2900	2900
KLO25-5394	OSTEOGENESIS IMPERFECTA GENE PANEL (M)	30000	30000	30000
KLO25-5395	OSTEOMON PROFILE-I	3000	3000	3000
KLO25-5396	OSTEONECTIN	2700	2700	2700
KLO25-5397	OSTEOPETROSIS GENE PANEL (M)	36000	36000	36000
KLO25-5398	OSTEOPOROSIS PANEL	6220	6220	6220
KLO25-5399	OSTEOPOROSIS PROFILE	11500	11500	11500
KLO25-5400	OSTEOSCREEN PANEL	5000	5000	5000
KLO25-5401	OTC DELETION DUPLICATION ANALYSIS (M)	20000	20000	20000
KLO25-5402	OVARIAN MALIGNANCY RISK ALGORITHM (ROMA)	3000	3000	3000
KLO25-5403	OVARIAN RESERVE PANEL	3000	3000	3000
KLO25-5404	Ovarian Reserve Profile-I	5900	5900	5900
KLO25-5405	OVARY ANTIBODIES	3300	3300	3300
KLO25-5406	OVARY ANTIBODIES TITRES	5600	5600	5600
KLO25-5407	OXALATE, 24 HRS. URINE	1900	1900	1900
KLO25-5408	OXALATE, URINE RANDOM	1900	1900	1900

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5409	OXAZEPAM	11420	11420	11420
KLO25-5410	OXCARBAMEZAPINE METABOLITE	6800	6800	6800
KLO25-5411	P1 NP (PROCOLLAGEN TYPE - 1, AMINO TERMINAL PROPEPTIDE	1650	1650	1650
KLO25-5412	P2PSA	1000	1000	1000
KLO25-5413	PACHYDERMOPERIOSTOSIS & PRIMARY HYPERTROPHIC OSTEOARTHROPATHY GENE PANEL (M)	36000	36000	36000
KLO25-5414	PAIN DRUG PROFILING PANEL - 49 DRUGS	7000	7000	7000
KLO25-5415	PALLISTER HALL SYNDROME (GLI3) GENE ANALYSIS (M)	30000	30000	30000
KLO25-5416	PALYMITOYL PROTEIN THIOESERASE (LEUCOCYTES)	4500	4500	4500
KLO25-5417	PAN NEUROTROPIC VIRUS PANEL	7500	7500	7500
KLO25-5418	PAN UVEITIS PANEL BY PCR	21000	21000	21000
KLO25-5419	PANCREATIC ELASTASE-1	13000	13000	13000
KLO25-5420	PANCREATIC POLYPEPTIDE	15100	15100	15100
KLO25-5421	PANFUNGAL - DETECTION & IDENTIFICATION	15600	15600	15600
KLO25-5422	PANFUNGAL -DNA DETECTION, PCR	4700	4700	4700
KLO25-5423	PANFUNGAL DNA DETECTOR	4700	4700	4700
KLO25-5424	PANFUNGAL-DNA DETECTION, CSF	4700	4700	4700
KLO25-5425	PANFUNGAL-DNA DETECTION,BODY FLUID	4700	4700	4700
KLO25-5426	PANFUNGAL-DNA DETECTION,SPUTUM	4700	4700	4700
KLO25-5427	PANORAMATM NON INVASIVE PRENATAL SCREENING TEST OR NIPS (TRISOMY 21, TRISOMY 18,TRISOMY 1	28000	28000	28000
KLO25-5428	PANTOTHENATE KINASE-ASSOCIATED DEGENERATION (PANK2) DELETION/DUPLICATION ANALYSIS (M)	10000	10000	10000
KLO25-5429	PANTOTHENATE KINASE-ASSOCIATED NEURODEGENERATION (PLA2G6) DELETION/DUPLICATION ANALY	15000	15000	15000
KLO25-5430	PANTOTHENATE KINASE-ASSOCIATED NEURODEGENERATION GENE PANEL (M)	36000	36000	36000
KLO25-5431	PARACETAMOL ACETAMINOPHEN	1400	1400	1400
KLO25-5432	PARAINFLUENZA 1,2 & 3, IGG ANTIBODY, SERUM	1600	1600	1600
KLO25-5433	PARAINFLUENZA 1,2 & 3, IGM ANTIBODY, SERUM	1700	1700	1700
KLO25-5434	PARANEOPLASTIC DISORDER PROFILE	6150	6150	6150
KLO25-5435	PARAOXYSMAL NOCTURNAL HEMOGLOBINUREA SCREENING TEST	1200	1200	1200
KLO25-5436	PARAOXYSMAL NOCURANL HEMOGLOBINUREA CONFIRMATORY(PNH)	6800	6800	6800
KLO25-5437	PARIETAL CELL ANTIBODY IIF (M)	2100	2100	2100
KLO25-5438	PAROXETINE	17110	17110	17110
KLO25-5439	PARVOVIRUS B - 19 ANTIBODIES PANEL, IGG & IGM	4550	4550	4550
KLO25-5440	PARVOVIRUS B 19 IGM ANTIBODY	2600	2600	2600
KLO25-5441	PARVOVIRUS B-19 IGG ANTIBODY	2600	2600	2600
KLO25-5442	PARVOVIRUS B19 QUALITATIVE (BS)	3840	3840	3840
KLO25-5443	PARVOVIRUS B19, DNA PCR	3400	3400	3400
KLO25-5444	PARVOVIRUS B19, DNA PCR, QUALITATIVE	2700	2700	2700
KLO25-5445	PARVOVIRUS B19, DNA PCR, QUANTITATIVE	16200	16200	16200
KLO25-5446	PARVOVIRUS B19-DNA PCR, AMNIOTIC FLUID	2800	2800	2800
KLO25-5447	PARVOVIRUS B19-DNA PCR, CSF	2800	2800	2800
KLO25-5448	Parvovirus PCR	6000	6000	6000
KLO25-5449	PAS (PERIODIC ACID SCHIFF) STAIN, BLOOD / BONE MARROW	490	490	490
KLO25-5450	PATERNITY TESTING DUO	28000	28000	28000
KLO25-5451	PATERNITY TESTING TRIO	32000	32000	32000
KLO25-5452	PATRILINEAL TESTING BY Y-STR PROFILING	23600	23600	23600

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5453	PAUL BUNNEL TEST INFECTIOUS MONONUCLEOSIS TEST	1000	1000	1000
KLO25-5454	PCP (PHENCYCLIDINE) SCREEN, RANDOM URINE	650	650	650
KLO25-5455	PDGFR PLUS (FIP1L1-PDGFRA GENE REARRANGEMENT AND TEL-PDGR BETA	11000	11000	11000
KLO25-5456	PDGFRA GENE ANALYSIS - 3 EXONS (12, 14, 18) (M)	7500	7500	7500
KLO25-5457	PE-CNGNOME (WGS for CNV Detection)	55000	55000	55000
KLO25-5458	PE-DNA Extraction + 2 Years Storage	5550	5550	5550
KLO25-5459	PE-Enhanced First Trimester Screening (eFTS) - Aneuploidy + PreEclampsia	3500	3500	3500
KLO25-5460	PE-Focused Exome (Clinical Exome + Mitochondrial	50000	50000	50000
KLO25-5461	PE-Focused Exome Plus(SNP+DEL/DUP)	50000	50000	50000
KLO25-5462	PE-Fragile X - FMR1 Triplet Repeat (CGG) Testing	5250	5250	5250
KLO25-5463	PE-FTS with NT-Double Marker	2800	2800	2800
KLO25-5464	PE-Karyotyping	3700	3700	3700
KLO25-5465	PE-Karyotyping & FISH for Aneuploidy Screen (13,18,21, X, Y Probes)	21300	21300	21300
KLO25-5466	PE-Microarray 315K	18000	18000	18000
KLO25-5467	PE-Microarray 750K	22000	22000	22000
KLO25-5468	PENICILLIN LEVEL BA	10450	10450	10450
KLO25-5469	PENICILLIUM CHRYSOGENUM - SPECIFIC IGG	2100	2100	2100
KLO25-5470	PE-NIPT with Microdeletions	25000	25000	25000
KLO25-5471	PE-Pre Natal BOBS(Aneuploidy + Microdeletions)	12000	12000	12000
KLO25-5472	PE-Pre Natal BOBS(Aneuploidy + Microdeletions)+ CMA 315 KB	30000	30000	30000
KLO25-5473	PEPSINOGEN I & II	11000	11000	11000
KLO25-5474	PE-QFPCR	9000	9000	9000
KLO25-5475	PE-QFPCR+CMA 315 KB	27000	27000	27000
KLO25-5476	PE-Quardruple	3500	3500	3500
KLO25-5477	PERIPHERAL BLOOD FOR HIGH RESOLUTION (BS)	6720	6720	6720
KLO25-5478	PERIPHERAL BLOOD FOR HIGH RESOLUTION KARYOTYPING (SINGLE) (BS)	3360	3360	3360
KLO25-5479	PERIPHERAL BLOOD FOR KARYOTYPING (COUPLE) (BS)	4500	4500	4500
KLO25-5480	PERIPHERAL BLOOD FOR KARYOTYPING (COUPLE) (G)	5200	5200	5200
KLO25-5481	PERIPHERAL BLOOD FOR KARYOTYPING (SINGLE) (G)	3300	3300	3300
KLO25-5482	PERITONEAL DIALYSIS ADEQUACY TEST	880	880	880
KLO25-5483	PERITONEAL EQUILIBRIUM & ADEQUACY TEST	2050	2050	2050
KLO25-5484	PERITONEAL EQUILIBRIUM TEST (PET)	1600	1600	1600
KLO25-5485	PERNICIOUS ANEMIA PANEL	5400	5400	5400
KLO25-5486	PEROXISOMAL DISORDER GENE PANEL (INCLUDES ADRENOLEUKODYSTROPHY) (M)	36000	36000	36000
KLO25-5487	PEROXISOME ASSEMBLY DISORDERS (HEPATOMEGALY AND CHOLESTASIS) GENE ANALYSIS (M)	36000	36000	36000
KLO25-5488	PERTUSSIS -IGG ANTIBODIES,SERUM	1400	1400	1400
KLO25-5489	PE-Whole Exome Plus(SNP+DEL/DUP)	90000	90000	90000
KLO25-5490	PGD (SINGLE EMBRYO) (BS)	21600	21600	21600
KLO25-5491	PGD (SINGLE EMBRYO) WITH MATERNAL DNA CONTAMINATION CHECK (BS)	30000	30000	30000
KLO25-5492	PGD (SINGLE GENE DISORDER)-BASELINE (BS)	36000	36000	36000
KLO25-5493	PGD HLA TYPING (BS)	24000	24000	24000
KLO25-5494	PGS (1-4) EMBRYO (BS)	90000	90000	90000
KLO25-5495	PGS (5-6) EMBRYO (BS)	108000	108000	108000
KLO25-5496	PGS (7-12) EMBRYO (BS)	144000	144000	144000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5497	PGT-A - 1 Embryos	20000	20000	20000
KLO25-5498	PGT-A - 2 Embryos	36000	36000	36000
KLO25-5499	PGT-A - 3 Embryos	51000	51000	51000
KLO25-5500	PGT-A - 4 Embryos	60000	60000	60000
KLO25-5501	PGT-A - 5 Embryos	70000	70000	70000
KLO25-5502	PGT-A - 6 Embryos	84000	84000	84000
KLO25-5503	PGT-A + PGT-M - 1 Embryo (1 Variant)	45000	45000	45000
KLO25-5504	PGT-A + PGT-M - 1 Embryo (2 Variant)	50000	50000	50000
KLO25-5505	PGT-A + PGT-M - 2 Embryos (1 Variant)	86000	86000	86000
KLO25-5506	PGT-A + PGT-M - 2 Embryos (2 Variant)	95000	95000	95000
KLO25-5507	PGT-A + PGT-M - 3 Embryos (1 Variant)	126000	126000	126000
KLO25-5508	PGT-A + PGT-M - 3 Embryos (2 Variant)	135000	135000	135000
KLO25-5509	PGT-A + PGT-M - 4 Embryos (1 Variant)	160000	160000	160000
KLO25-5510	PGT-A + PGT-M - 4 Embryos (2 Variant)	170000	170000	170000
KLO25-5511	PGT-A + PGT-M - 5 Embryos (1 Variant)	195000	195000	195000
KLO25-5512	PGT-A + PGT-M - 5 Embryos (2 Variant)	205000	205000	205000
KLO25-5513	PGT-A + PGT-M - 6 Embryos (1 Variant)	234000	234000	234000
KLO25-5514	PGT-A + PGT-M - 6 Embryos (2 Variant)	245000	245000	245000
KLO25-5515	PGT-M - 1 Embryo (1 Variant)	25000	25000	25000
KLO25-5516	PGT-M - 1 Embryo (2 Variant)	35000	35000	35000
KLO25-5517	PGT-M - 2 Embryos (1 Variant)	50000	50000	50000
KLO25-5518	PGT-M - 2 Embryos (2 Variant)	70000	70000	70000
KLO25-5519	PGT-M - 3 Embryos (1 Variant)	75000	75000	75000
KLO25-5520	PGT-M - 3 Embryos (2 Variant)	105000	105000	105000
KLO25-5521	PGT-M - 4 Embryos (1 Variant)	100000	100000	100000
KLO25-5522	PGT-M - 4 Embryos (2 Variant)	140000	140000	140000
KLO25-5523	PGT-M - 5 Embryos (1 Variant)	125000	125000	125000
KLO25-5524	PGT-M - 5 Embryos (2 Variant)	175000	175000	175000
KLO25-5525	PGT-M - 6 Embryos (1 Variant)	150000	150000	150000
KLO25-5526	PGT-M - 6 Embryos (2 Variant)	210000	210000	210000
KLO25-5527	PGX PERFECT TEST (G)	5200	5200	5200
KLO25-5528	PHADIA INFANT	1000	1000	1000
KLO25-5529	PHADIA TOP	1000	1000	1000
KLO25-5530	PHENCYCLIDINE (PCP) CONFIRMATION, URINE	43100	43100	43100
KLO25-5531	PHENOBARBITAL	2630	2630	2630
KLO25-5532	PHENOBARBITONE	1000	1000	1000
KLO25-5533	PHENOL	2200	2200	2200
KLO25-5534	PHENOL EXPOSURE,URINE	10530	10530	10530
KLO25-5535	PHENYLALANINE	12620	12620	12620
KLO25-5536	PHENYLALANINE NEONATAL SCREEN	280	280	280
KLO25-5537	PHENYLALANINE, QUANTITATIVE , SERUM	5950	5950	5950
KLO25-5538	PHENYLALANINE, QUANTITATIVE, URINE 24 HOURS	5950	5950	5950
KLO25-5539	PHENYLALANINE, SCREEN, SERUM OR URINE	1500	1500	1500
KLO25-5540	PHENYLKETONURIA (PAH) GENE ANALYSIS (M)	30000	30000	30000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5541	PHENYTOIN (DILANTIN) LEVEL	1100	1100	1100
KLO25-5542	PHEOCHROMOCYTOMA MARKER PROFILE -I, URINE 24 HOURS	6500	6500	6500
KLO25-5543	PHEOCHROMOCYTOMA MARKER PROFILE-II, PLASMA & URINE	10000	10000	10000
KLO25-5544	PHEOCHROMOCYTOMA PROFILE, 24-HOUR URINE	15000	15000	15000
KLO25-5545	PHEUMOSLIDE TEST	3680	3680	3680
KLO25-5546	PHOSPHATIDYL CHOLINE-IGG	1100	1100	1100
KLO25-5547	PHOSPHATIDYL CHOLINE-IGM	1100	1100	1100
KLO25-5548	PHOSPHATIDYL ETHANOLAMIN IgG ANTIBODY	1100	1100	1100
KLO25-5549	PHOSPHATIDYL ETHANOLAMIN IgM ANTIBODY	1100	1100	1100
KLO25-5550	PHOSPHATIDYL INOSITOL IgG ANTIBODY	1150	1150	1150
KLO25-5551	PHOSPHATIDYL INOSITOL IgM ANTIBODY	1150	1150	1150
KLO25-5552	PHOSPHATIDYLSERINE ANTIBODIES PANEL, IGG & IGM	4150	4150	4150
KLO25-5553	PHOSPHATIDYLSERINE ANTIBODY -IgG	2400	2400	2400
KLO25-5554	PHOSPHATIDYLSERINE ANTIBODY-IgM	2400	2400	2400
KLO25-5555	PHOSPHATYDIC ACID-IGG (PHOSPHOLIPID)	2200	2200	2200
KLO25-5556	PHOSPHATYDIC ACID-IGM (PHOSPHOLIPID)	2200	2200	2200
KLO25-5557	PHOSPHOLIPASE A2 RECEPTOR ANTIBODY	5600	5600	5600
KLO25-5558	PHOSPHOLIPID PROFILE -2 IgM ANTIBODY	4950	4950	4950
KLO25-5559	PHOSPHOLIPID PROFILE -3 IgG & IgM ANTIBODY	7700	7700	7700
KLO25-5560	PHOSPHOLIPID PROFILE -I IgG ANTIBODY	4950	4950	4950
KLO25-5561	PHOSPHOLIPID SYNDROME PANEL	4900	4900	4900
KLO25-5562	PHOSPHOLIPID SYNDROME PANEL WITH BETA 2 GLYCOPROTEIN 1, IHR	5180	5180	5180
KLO25-5563	PI - MCC+QF PCR	10000	10000	10000
KLO25-5564	PI - PRENATAL BOBS+KT (AMNIOTIC FLUID / DNA)	20500	20500	20500
KLO25-5565	PI - PRENATAL BOBS+KT (CVS / DNA)	16500	16500	16500
KLO25-5566	PI - PRENATAL BOBS+KT (FETAL BLOOD)	14000	14000	14000
KLO25-5567	PI - QF PCR + KARYOTYPE	16500	16500	16500
KLO25-5568	PI-ENHANCED FIRST TRIMESTER (eFTS)- Aneuploidy + PreEclampsIa	3000	3000	3000
KLO25-5569	PIGEON DROPPINGSS (E7) IGE	2900	2900	2900
KLO25-5570	PIGEON FEATHERS -IgE	2900	2900	2900
KLO25-5571	PIGEON SERUM PROTEIN, FEATHER & DROPPINGS - SPECIFIC IGG	2100	2100	2100
KLO25-5572	PIIINP (PROCOLLAGEN TYPE III AMINO TERMINAL PROPEPTIDE), SERUM	4000	4000	4000
KLO25-5573	PIK3CA MUTATION ANALYSIS	5900	5900	5900
KLO25-5574	PI-KARYOTYPE	3500	3500	3500
KLO25-5575	PIN 4	2700	2700	2700
KLO25-5576	PI-NIPT (Aneucare)	14000	14000	14000
KLO25-5577	PI-PRENATAL BOBS	9000	9000	9000
KLO25-5578	PI-PRENATAL BOBS + KT (AF)	15000	15000	15000
KLO25-5579	PI-PRENATAL BOBS + KT (CVS)	15000	15000	15000
KLO25-5580	PI-PRENATAL BOBS + KT (FETAL BLOOD)	14000	14000	14000
KLO25-5581	PI-QUADRUPLE TEST	3500	3500	3500
KLO25-5582	PIVKA TOTAL	4000	4000	4000
KLO25-5583	PIVKA-II (Decarboxy Prothrombine)	3800	3800	3800
KLO25-5584	PLA2 RECEPTOR ANTIBODY	5300	5300	5300

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5585	PLACENTA SCORE	3000	3000	3000
KLO25-5586	PLACENTAL GROWTH FACTOR (PLGF)	2500	2500	2500
KLO25-5587	PLASMINOGEN ACTIVATOR ASSARY (PAI)	11730	11730	11730
KLO25-5588	PLASMINOGEN ACTIVATOR INHIBITOR-1 (PAL-1)4G/5G	14400	14400	14400
KLO25-5589	PLATE/SLANT FOR IDENTIFICATION & SUSPECTIBILITY	800	800	800
KLO25-5590	PLATELET ANTIBODIES, QUALITATIVE	6000	6000	6000
KLO25-5591	PLATELET COUNT , FLUOROSCENT (PLT-F)	220	220	220
KLO25-5592	PLATELET COUNT- IMMUNOGLOGICAL (CD41)	1800	1800	1800
KLO25-5593	PLGF BIOCHEMISTRY ONLY	2500	2500	2500
KLO25-5594	PML-RAR GENE FUSION ANALYSIS (QUALITATIVE) (M)	4000	4000	4000
KLO25-5595	PML-RARA , bcr1CELLS	6000	6000	6000
KLO25-5596	PML-RARA QUALITATIVE	5200	5200	5200
KLO25-5597	PML-RARA QUANTITATIVE	5600	5600	5600
KLO25-5598	PML-RARA T (15;17)(Q22;Q21) GENE REARRANGEMENT	5600	5600	5600
KLO25-5599	PML-RARA, bcr3 CELLS	4280	4280	4280
KLO25-5600	PMP22 GENE ANALYSIS (INFLAMMATORY DEMYELINATING POLYNEUROPATHY SCREEN) (M)	30000	30000	30000
KLO25-5601	PMS2	2700	2700	2700
KLO25-5602	PND KARYOTYPING (BS)	9600	9600	9600
KLO25-5603	PND KARYOTYPING + CYTOPRIME MICROARRAY (G)	19500	19500	19500
KLO25-5604	PNDT- CHRIONIC VILLES BIOPSY (FISH)	13000	13000	13000
KLO25-5605	PNEUMOCYSITIS JIROVECI (CARINII),DFA	4800	4800	4800
KLO25-5606	PNEUMOCYSTIS CARINII IMMUNOFLUORESCENCE	3000	3000	3000
KLO25-5607	PNEUMOCYSTIS SPECIES DIF	2520	2520	2520
KLO25-5608	PNEUMOCYSTIS SPECIES, IMMUNOFLUORESCENCE	2730	2730	2730
KLO25-5609	PNEUMONIA (VIRAL) PANEL-1, PCR	6600	6600	6600
KLO25-5610	PNEUMONIA (VIRAL) PANEL-2, PCR	6050	6050	6050
KLO25-5611	PNEUMONIA (VIRAL) PANEL-3 PCR	7220	7220	7220
KLO25-5612	PNEUMONIA , PANEL BACTERIAL	7150	7150	7150
KLO25-5613	PNEUMONIA, PANEL (ATYPICAL)-IgM	7090	7090	7090
KLO25-5614	PNEUMOSLIDE IgM, IFA	3680	3680	3680
KLO25-5615	PNH TEST, SERUM & BLOOD	6800	6800	6800
KLO25-5616	PNMA2 (MA2/TA) ANTIBODY NEURONAL ANTIGEN,PARANEOPLASTIC SYNDROME	4600	4600	4600
KLO25-5617	POLARIZING MICROSCOPY FOR CRYSTALS	900	900	900
KLO25-5618	POLARIZING MICROSCOPY, BODY FLUID (L)	330	330	330
KLO25-5619	POLIOVIRUS ANTIBODY NEUTRALIZATION	15820	15820	15820
KLO25-5620	POLYCYSTIC KIDNEY DISEASE (PKHD1) DEFICIENCY DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-5621	POLYCYSTIC KIDNEY DISEASE GENE PANEL (ARPKD: PKHD1/ADPKD: PKD1 & PKD2) (M)	30000	30000	30000
KLO25-5622	POLYCYSTIC KIDNEY DISEASE GENE PANEL (BS)	42000	42000	42000
KLO25-5623	POLYCYSTIC LIVER DISEASE (CONGENITAL CYSTIC DISEASE OF LIVER) PRKCSH, SEC63 - GENE ANALYSIS	36000	36000	36000
KLO25-5624	POMPE DISEASE (GAA) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-5625	POMPE DISEASE (GAA) GENE ANALYSIS (M)	30000	30000	30000
KLO25-5626	Pompe Disease Enzyme Assay	5500	5500	5500
KLO25-5627	POMPE DISEASE QUANTITATIVE, BLOOD. (L)	2600	2600	2600
KLO25-5628	PONTOCEREBELLAR HYPOPLASIA GENE PANEL (M)	36000	36000	36000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5629	PORPHOBILINOGEN (PBG) QUANTITATIVE, URINE 24 HOURS	3800	3800	3800
KLO25-5630	PORPHOBILINOGEN QUALITATIVE (2ND MORNING), URINE	3490	3490	3490
KLO25-5631	PORPHYRINE, URINE	4800	4800	4800
KLO25-5632	PORPHYRINS, 24 HRS. URINE	4800	4800	4800
KLO25-5633	PORPHYRINS, TOTAL, PLASMA	5500	5500	5500
KLO25-5634	PORPHYRINSM FRACTIONED PLASMA	5580	5580	5580
KLO25-5635	PRADER VILLI METHYLATION	6500	6500	6500
KLO25-5636	PRADER VILLI SYNDROME MUTATION DETECTION, PCR	8400	8400	8400
KLO25-5637	PRADER-VILLI/ANGELMAN REGION (15q11.2) (L)	6000	6000	6000
KLO25-5638	PRADERWILLI METHYLATION	6500	6500	6500
KLO25-5639	PRADER-WILLI SYNDROME (BS)	6600	6600	6600
KLO25-5640	PRADER-WILLI/ANGELMAN SYNDROME DELETION/DUPLICATION ANALYSIS (M)	20000	20000	20000
KLO25-5641	PRE ECLAMPSIA RISK ASSESSMENT	3000	3000	3000
KLO25-5642	PREALBUMIN	6840	6840	6840
KLO25-5643	PREDICT TO PREVENT (FTS + PRE-ECLMAPSIA COMBO)	3000	3000	3000
KLO25-5644	PRE-ECLAMPSIA PREDICTOR PANEL	5000	5000	5000
KLO25-5645	PRE-ECLAMPSIA WITH COMPLETE RISK ASSESMENT- PLGF, PAPP-A	3000	3000	3000
KLO25-5646	PREGNENOLONE	11100	11100	11100
KLO25-5647	PREIMPLANTATION GENETIC SCREENING (PGS)	14000	14000	14000
KLO25-5648	PRE-IMPLANTATION GENETIC SCREENING(PGS) - SINGLE EMBRYO BIOPSY (M)	20000	20000	20000
KLO25-5649	PRENATAL B THALASSAEMIA/HBE (BS)	4800	4800	4800
KLO25-5650	PRENATAL BETA - THALASSEMIA KNOWN MUTATION	13000	13000	13000
KLO25-5651	PRENATAL BETA - THALASSEMIA UNKNOWN MUTATION	19000	19000	19000
KLO25-5652	PRENATAL CLINICAL EXOME + MCC (M)	20000	20000	20000
KLO25-5653	PRENATAL COMPREHENSIVE SCREENING PANEL 1	11000	11000	11000
KLO25-5654	PRENATAL DIAGNOSIS METACHROMATIC LEUKODYSTROPHY	5000	5000	5000
KLO25-5655	PRENATAL DIAGNOSIS PANEL- GAUCHER DISEASE	5000	5000	5000
KLO25-5656	PRENATAL DIAGNOSIS PANEL-1 (CHORIONIC VILLUS BIOPSY)	40000	40000	40000
KLO25-5657	PRENATAL DIAGNOSIS PANEL-2 (AMNIOTIC FLUID)	5000	5000	5000
KLO25-5658	PRENATAL DIAGNOSIS PANEL-FABRY DISEASE	5000	5000	5000
KLO25-5659	PRENATAL DIAGNOSIS, GM1 GANGLIOSIDOSIS	5000	5000	5000
KLO25-5660	PRENATAL DIAGNOSIS, GM2 GANGLIOSIDOSIS	5000	5000	5000
KLO25-5661	PRENATAL DIAGNOSIS, MPS1 HURLER	5000	5000	5000
KLO25-5662	PRENATAL DIAGNOSIS, POMPE DISEASE	5000	5000	5000
KLO25-5663	PRENATAL DMD MUTATION (26 EXONS) (BS)	8400	8400	8400
KLO25-5664	Prenatal Karyotype + FISH 5 Chromosomes + FISH-22q Microdeletion	18000	18000	18000
KLO25-5665	PRENATAL SANGER VALIDATION (TWO VARIANTS)	11300	11300	11300
KLO25-5666	Prenatal Sanger Varient Analysis (1 varient)	8000	8000	8000
KLO25-5667	PRENATAL SICKLE CELL DISEASE (BS)	4800	4800	4800
KLO25-5668	Pre-PGT - 1 Individual (1 variant)	25000	25000	25000
KLO25-5669	Pre-PGT - 2 Individuals (1 variant)	50000	50000	50000
KLO25-5670	Pre-PGT - 3 Individuals (1 variant)	75000	75000	75000
KLO25-5671	Pre-PGT - 3 Individuals (2 variants)	105000	105000	105000
KLO25-5672	Pre-PGT - 4 Individuals (1 variant)	100000	100000	100000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5673	Pre-PGT - 4 Individuals (2 variants)	140000	140000	140000
KLO25-5674	Pre-PGT - 5 Individuals (1 variant)	125000	125000	125000
KLO25-5675	Pre-PGT - 5 Individuals (2 variants)	175000	175000	175000
KLO25-5676	Pre-PGT - 6 Individuals (2 variants)	210000	210000	210000
KLO25-5677	PRIMARY HYPEROXALURIA GENE PANEL (M)	33000	33000	33000
KLO25-5678	PRIMARY IMMUNE DEFICIENCY SCREENING PANEL (PIDOT)	9700	9700	9700
KLO25-5679	PRIMARY IMMUNODEFICIENCY GENE PANEL (M)	33000	33000	33000
KLO25-5680	PRO GRP PRO GASTRIN RELEASING PEPTIDE	8900	8900	8900
KLO25-5681	PROCAINAMIDE (PRONESTYL)	11870	11870	11870
KLO25-5682	PROCOLLAGEN PEPTIDE TYPE 1 EIA PICP CICP	7170	7170	7170
KLO25-5683	ProGastrin Releasing Peptide (ProGRP)	8220	8220	8220
KLO25-5684	PROGESTERONE RECEPTOR.-IHC	1460	1460	1460
KLO25-5685	PROGESTRONE LEVEL (PROGESTRONE)	700	700	700
KLO25-5686	PROGRESSIVE FAMILIAL INTRAHEPATIC CHOLESTASIS GENE PANEL (M)	33000	33000	33000
KLO25-5687	PROGRESSIVE MYOCLONIC EPILEPSY GENE PANEL (M)	33000	33000	33000
KLO25-5688	PROGRESTERONE, LC/MS/MS	3490	3490	3490
KLO25-5689	PROINSULIN	11660	11660	11660
KLO25-5690	PROPERDIN FACTOR B, C3 PROACTIVATOR	8240	8240	8240
KLO25-5691	PROPIONIC ACIDEMIA (PCCA) DEFICIENCY DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-5692	PROPOXYPHENE, URINE	700	700	700
KLO25-5693	PROPRANOLOL	5600	5600	5600
KLO25-5694	PRORENIN	6320	6320	6320
KLO25-5695	PROSTATE HEALTH INDEX (PHI)	2800	2800	2800
KLO25-5696	PROTEIN & IMMUNOGLOBULIN PANEL	1700	1700	1700
KLO25-5697	PROTEIN C ACTIVITY	4250	4250	4250
KLO25-5698	PROTEIN C ACTIVITY AND ANTIGEN	9000	9000	9000
KLO25-5699	PROTEIN C ANTIGEN	10160	10160	10160
KLO25-5700	PROTEIN C ANTIGENIC	12270	12270	12270
KLO25-5701	PROTEIN C, FUNCTIONAL	4640	4640	4640
KLO25-5702	PROTEIN ELECTROPHORESIS & IDE, SERUM	5050	5050	5050
KLO25-5703	PROTEIN S , FREE	5000	5000	5000
KLO25-5704	PROTEIN S ACTIVITY	4250	4250	4250
KLO25-5705	PROTEIN S ANTIGEN FREE	5000	5000	5000
KLO25-5706	PROTEIN S ANTIGENIC	11600	11600	11600
KLO25-5707	PROTEIN S DEFICIENCY (PROS1 GENE DELETION/DUPLICATION ANALYSIS) (M)	15000	15000	15000
KLO25-5708	PROTEIN S FUNCTIONAL	4640	4640	4640
KLO25-5709	PROTHROMBIN GENE MUTATION ANALYSIS	3600	3600	3600
KLO25-5710	PROTHROMBIN (FACTOR II) GENE MUTATION G20210A	6500	6500	6500
KLO25-5711	PROTHROMBIN 20210G A MUTATION ANALYSIS	7620	7620	7620
KLO25-5712	PROTHROMBIN GENE MUTATION	3600	3600	3600
KLO25-5713	PSEUDOCHOLINESTERASE (OPC POISONING)	1000	1000	1000
KLO25-5714	PSYCHIATRIC DRUG GENOTYPING - 49 DRUGS	7000	7000	7000
KLO25-5715	PTEN GENE ANALYSIS (M)	15000	15000	15000
KLO25-5716	PTH ANTIBODY	14560	14560	14560

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5717	PTH RELATED PROTEIN	11950	11950	11950
KLO25-5718	PTT & APTT MIXING STUDIES	3000	3000	3000
KLO25-5719	PULMONARY ALVEOLAR MICROLITHIASIS (SLC34A2) GENE ANALYSIS (M)	30000	30000	30000
KLO25-5720	PURKINJE CELLS (YO) ANTIBDOY, WITH REFLEX TO TITRE CSF	17530	17530	17530
KLO25-5721	PURKINJE CELLS (YO) ANTIBODY WITH REFLEX TO TITRE	14420	14420	14420
KLO25-5722	PV JAK 2 REFLEX PANEL	7000	7000	7000
KLO25-5723	PYRIDINIUM COLLAGEN CROSS-LINKS (PYD), 2-HOUR URINE	10270	10270	10270
KLO25-5724	PYRROLES, URINE	9380	9380	9380
KLO25-5725	PYRUVATE, PYRUVIC ACID	3500	3500	3500
KLO25-5726	Q FEVER (COXIELLA BURNETTI -IGG), SERUM	1850	1850	1850
KLO25-5727	Q FEVER (COXIELLA BURNETTI -IGM), SERUM	1850	1850	1850
KLO25-5728	Q FEVER ANTIBODIES	7100	7100	7100
KLO25-5729	QF PCR +MCC+MICROARRAY (315 K) -M	13500	13500	13500
KLO25-5730	QF PCR PANEL + MICROARRAY 750K + WHOLE EXOME SEQUENCING + MCC (SN)	29000	29000	29000
KLO25-5731	QF-PCR + Prenatal Karyotype	13000	13000	13000
KLO25-5732	QFPCR +KARYOTYPING (BS)	7500	7500	7500
KLO25-5733	QFPCR -BASIC COVERS (BS)	5000	5000	5000
KLO25-5734	QFPCR+750 K MICROARRAY	17000	17000	17000
KLO25-5735	QFPCR+MLPA (BS)	8000	8000	8000
KLO25-5736	QNATAL ADVANCE	28000	28000	28000
KLO25-5737	QUADRUPLE INTEGRATED SCREENING	3000	3000	3000
KLO25-5738	RA FACTOR, IgA	840	840	840
KLO25-5739	RAAS SCREENING PANEL PRA & ALDOSTERONE	5200	5200	5200
KLO25-5740	RABIES ANTIBODY, SERUM EIA	8000	8000	8000
KLO25-5741	RANBP2 GENE ANALYSIS (M)	33000	33000	33000
KLO25-5742	RAPID EXOME SEQUENCING	38000	38000	38000
KLO25-5743	RAPID TB ANTIGEN MPT64	630	630	630
KLO25-5744	RAS EXTENDED PROFILING ANALYSIS BY NGS (M)	30000	30000	30000
KLO25-5745	RASOPATHY GENE PANEL (M)	36000	36000	36000
KLO25-5746	RAW DATA CHARGES (M)	500	500	500
KLO25-5747	RB1 GENE ANALYSIS (M)	30000	30000	30000
KLO25-5748	RB1 GENE DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-5749	RBC FRAGILITY TEST (OSMOTIC FRAGILITY)	750	750	750
KLO25-5750	RENAL (KIDNEY) BIOPSY BY ELECTRON MICROSCOPY- HISTOPATHOLOGY	13000	13000	13000
KLO25-5751	RENAL (KIDNEY) BIOPSY BY IF (IGG, IGM, IGA. C3, C1Q MARKERS)-HISTOPATHOLOGY	3800	3800	3800
KLO25-5752	RENAL CALCULUS ANALYSIS (KIDNEY STONE) WITH PICTURE	1200	1200	1200
KLO25-5753	RENAL CALCULUS FORMATION THERAPEUTIC MONITORING PANEL	4700	4700	4700
KLO25-5754	RENAL CALCULUS FORMATION, DIAGNOSTIC PANEL	5500	5500	5500
KLO25-5755	RENIN ACTIVITY PLASMA, PRA	5600	5600	5600
KLO25-5756	RENIN, IMMUNOREACTIVE RENIN DIRECT	6940	6940	6940
KLO25-5757	RESPIRATORY ALLERGY PROFILE	9000	9000	9000
KLO25-5758	RESPIRATORY COMPREHENSIVE PROFILE	16200	16200	16200
KLO25-5759	RESPIRATORY PANEL -1	3200	3200	3200
KLO25-5760	RESPIRATORY PANEL -3	3200	3200	3200

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5761	RESPIRATORY PANEL -4	3200	3200	3200
KLO25-5762	RESPIRATORY PANEL -8	3200	3200	3200
KLO25-5763	RESPIRATORY PANEL 9	15100	15100	15100
KLO25-5764	RESPIRATORY PANEL-2	3200	3200	3200
KLO25-5765	RESPIRATORY PANEL-5	7600	7600	7600
KLO25-5766	RESPIRATORY PANEL-6	3200	3200	3200
KLO25-5767	RESPIRATORY PANEL-7	3200	3200	3200
KLO25-5768	RESPIRATORY SYNCTIAL VIRUS-IGG ANTIBODY	3600	3600	3600
KLO25-5769	RESPIRATORY SYNCTIAL VIRUS-IGM ANTIBODY	3600	3600	3600
KLO25-5770	RESPIRATORY SYNCYTIAL VIRUS (RSV), ANTIGEN	1680	1680	1680
KLO25-5771	RESPIRATORY TRACT INFECTION PROFILE -IGM SERUM	5900	5900	5900
KLO25-5772	RESPIRATORY TRACT INFECTION PROFILE-IGG SERUM	5900	5900	5900
KLO25-5773	RET ONCOGENE - 2 EXONS (10, 11) (M)	9000	9000	9000
KLO25-5774	RET ONCOGENE - 8 EXONS (5, 8, 10, 11, 13, 14, 15, 16) (M)	16000	16000	16000
KLO25-5775	RETICULIN ANTIBODY IgA	6200	6200	6200
KLO25-5776	RETICULIN SCREEN, REFLEX TO TITRE	2110	2110	2110
KLO25-5777	RETINAL DEGENERATION GENE PANEL (BS)	43200	43200	43200
KLO25-5778	RETINAL DEGENERATION GENE PANEL (M)	33000	33000	33000
KLO25-5779	RETINITIS PANEL BY PCR3 DNA VIRUS	10000	10000	10000
KLO25-5780	RETINOL BINDING PROTEIN	2910	2910	2910
KLO25-5781	RETT DETECTION SYNDROME	7400	7400	7400
KLO25-5782	RETT GENE MUTATION	2500	2500	2500
KLO25-5783	RETT SYNDORME	37210	37210	37210
KLO25-5784	RETT SYNDROME (MECP2) DELETION/DUPLICATION ANALYSIS (M)	10000	10000	10000
KLO25-5785	RETT SYNDROME GENE PANEL (M)	33000	33000	33000
KLO25-5786	RETT SYNDROME MECP2 DELETION/DULICATION	8100	8100	8100
KLO25-5787	RETT SYNDROME MECP2 SEQUENCING	6000	6000	6000
KLO25-5788	RETT SYNDROME MUTATION ANALYSIS	25440	25440	25440
KLO25-5789	REVIEW BY EXTERNAL EXPERT-HISTOPATH	8900	8900	8900
KLO25-5790	RFC1 (REPLICATION FACTOR C1) (80G>A) (BS)	4200	4200	4200
KLO25-5791	RHEUMATOIDE ARTHRITIS AUTO IMMUNE PANEL	5750	5750	5750
KLO25-5792	RHEUMATOIDE AUTO IMMUNE COMPREHENSIVE PANEL	10000	10000	10000
KLO25-5793	RIBOSOMAL P ANTIBODY	7740	7740	7740
KLO25-5794	RICKETTEIS ANTIBODY PANEL	19000	19000	19000
KLO25-5795	RICKETTESIA PCR	5000	5000	5000
KLO25-5796	RICKETTSIAL DISEASE PANEL	17500	17500	17500
KLO25-5797	RISTOCETIN COFACTOR (PLATELET AGGREGATION)	14700	14700	14700
KLO25-5798	RNP-SM ANTIGEN IGG	2750	2750	2750
KLO25-5799	ROCKY MOUNTAIN SPOTTTED FEVER ANTIBODY	7430	7430	7430
KLO25-5800	ROMA INDEX, SERUM	3200	3200	3200
KLO25-5801	ROS1 GENE FUSION ANALYSIS (M)	7000	7000	7000
KLO25-5802	ROS1 IHC ANALYSIS (M)	6400	6400	6400
KLO25-5803	ROTA VIRUS ANTIGEN DETECTION	1000	1000	1000
KLO25-5804	ROTA VIRUS SEROLOGY, SERUM	3100	3100	3100

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5805	ROUND CELL TUMORS, ADULT 2 (HMB-45,MPO,S-100)	5500	5500	5500
KLO25-5806	ROUND CELL TUMORS, BONE (NSE, S-100, DESMIN, CD45, SYNAP/CHROMO A, CD99, PANCK)	9000	9000	9000
KLO25-5807	ROUND CELL TUMOURS 1 (NSE, CD45 PANCK)	5000	5000	5000
KLO25-5808	ROUND CELLL TUMORS, PEDIATRIC	6500	6500	6500
KLO25-5809	RPL (RECURRENT PREGNENCY LOSS PANEL) PANEL	6500	6500	6500
KLO25-5810	RSV- RESPIRATORY SYNCYTICAL VIRUS IgG ANTIBODY	3600	3600	3600
KLO25-5811	RSV- RESPIRATORY SYNCYTICAL VIRUS IgM ANTIBODY	3600	3600	3600
KLO25-5812	RUBELLA AVIDITY TEST	1200	1200	1200
KLO25-5813	RUBELLA IGG ADVANTAGE	1050	1050	1050
KLO25-5814	RUBELLA IgG AVIDITY	660	660	660
KLO25-5815	RUBELLA QUALITATIVE (BS)	1680	1680	1680
KLO25-5816	RUBELLA RNA DETECTION, PCR	6000	6000	6000
KLO25-5817	RUBELLA VIRUS AVIDITY TEST	640	640	640
KLO25-5818	RUBELLA-RNA DETECTION, AMNIOTIC FLUID	3750	3750	3750
KLO25-5819	RUBELLA-RNA DETECTION, CHORIONIC VILLUS	3750	3750	3750
KLO25-5820	RUBELLA-RNA DETECTION, CORD BLOOD	3750	3750	3750
KLO25-5821	RUBELLA-RNA DETECTION, CSF	3750	3750	3750
KLO25-5822	RUBELLA-RNA DETECTION, URINE	2700	2700	2700
KLO25-5823	RUBINSTEIN-TAYBI SYNDROME - CREBBP GENE DELETION (M)	20000	20000	20000
KLO25-5824	RVVT- RUSSELL VIPER VENOM TIME LUPUS SCREEN	950	950	950
KLO25-5825	SAB CLASS I	18000	18000	18000
KLO25-5826	SAB CLASS II	18000	18000	18000
KLO25-5827	Saccharomyces Cerevisiae (ASCA)-IgA	2100	2100	2100
KLO25-5828	Saccharomyces Cerevisiae (ASCA)-IgG	2100	2100	2100
KLO25-5829	SACCHAROMYCES CERVISIAE ANTIBODY IgA	3000	3000	3000
KLO25-5830	SACCHAROMYCES CERVISIAE ANTIBODY IgG	3000	3000	3000
KLO25-5831	SALICYLATE	10800	10800	10800
KLO25-5832	SALL 4	2130	2130	2130
KLO25-5833	SALMONELLA TYPHI AND SALMONELLA PARATYPHI A ANTIGEN DETECTION	530	530	530
KLO25-5834	SANFILLIPO B/MPS III B	5500	5500	5500
KLO25-5835	SANGER CONFIRMATION (G)	5500	5500	5500
KLO25-5836	SANGER SEQUENCING, SINGLE VARIANT	7000	7000	7000
KLO25-5837	SANGER VALIDATION (2 VARIANTS)	7000	7000	7000
KLO25-5838	SARCOMA MUTATION ANALYSIS	36790	36790	36790
KLO25-5839	SCA (SPINO CEREBRAL ATAXIA) (SINGLE FORM) (BS)	3000	3000	3000
KLO25-5840	SCA (SPINOCEREBELLAR ATAXIA), PROFILE ANY 4 MARKERS	7500	7500	7500
KLO25-5841	SCA -1 (SPINO CEREBELLAR ATAXIA) MUTATION, PCR	3300	3300	3300
KLO25-5842	SCA -1 (SPINO CEREBELLAR ATAXIA), ATXN1 GENE MUTATION	2500	2500	2500
KLO25-5843	SCA -10 (SPINO CEREBELLAR ATAXIA) MUTATION, PCR	3000	3000	3000
KLO25-5844	SCA -12 (SPINO CEREBELLAR ATAXIA), TYPE 12	2500	2500	2500
KLO25-5845	SCA -17 (SPINO CEREBELLAR ATAXIA), TYPE 17	3000	3000	3000
KLO25-5846	SCA -2 (SPINIO CEREBELLAR ATAXIA) MUTATION, PCR	3300	3300	3300
KLO25-5847	SCA -2 (SPINO CEREBELLAR ATAXIA), ATXN2 GENE MUTATION	2500	2500	2500
KLO25-5848	SCA -3 (SPINO CEREBELLAR ATAXIA) MUTATION, PCR	3300	3300	3300

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5849	SCA -3 (SPINO CEREBELLAR ATAXIA), ATXN3 GENE MUTATION	2500	2500	2500
KLO25-5850	SCA -4 (SPINO CEREBELLAR ATAXIA) MUTATION, PCR	3300	3300	3300
KLO25-5851	SCA -5 (SPINO CEREBELLAR ATAXIA) MUTATION, PCR	3300	3300	3300
KLO25-5852	SCA -6 (SPINO CEREBELLAR ATAXIA) MUTATION, PCR	3300	3300	3300
KLO25-5853	SCA -6 (SPINO CEREBELLAR ATAXIA), CACNA1A GENE	2500	2500	2500
KLO25-5854	SCA -7 (SPINO CEREBELLAR ATAXIA) MUTATION, PCR	3300	3300	3300
KLO25-5855	SCA -7 (SPINO CEREBELLAR ATAXIA), ATXN7 GENE MUTATION	2500	2500	2500
KLO25-5856	SCA COMPREHENSIVE PANEL (1, 2, 3, 6, 7, 10, & 12 TYPES)	11900	11900	11900
KLO25-5857	SCA PANEL (1, 2, 3, 6, 7, 10 & 12) (BS)	12000	12000	12000
KLO25-5858	SCA-11 (SPINOCEREBELLAR ATAXIA), TTBK2 GENE MUTATION	5900	5900	5900
KLO25-5859	SCA-14 (SPINOCEREBELLAR ATAXIA), PRKCG GENE MUTATION	6000	6000	6000
KLO25-5860	SCA-23 (SPINOCEREBELLAR ATAXIA), PDYN GENE MUTATION	6000	6000	6000
KLO25-5861	SCA-5 (SPINOCEREBELLAR ATAXIA) SPTBN2 GENE MUTATION	5900	5900	5900
KLO25-5862	SCA-8 (SPINOCEREBELLAR ATAXIA), ATXN8OS & ATXN8 GENE MUTATION	6000	6000	6000
KLO25-5863	SCHISTOSOMA ANTIBODY (IGG)FMI,SERUM	2900	2900	2900
KLO25-5864	SCL -70 ANTIBODY	1300	1300	1300
KLO25-5865	SCL -70 ANTIBODY (ANTI TOPOISOMERASE-1)	2500	2500	2500
KLO25-5866	SCLERODERMA PANEL	5000	5000	5000
KLO25-5867	SCLERODERMA PANEL(L)	2300	2300	2300
KLO25-5868	SECKEL SYNDROME GENE PANEL (M)	36000	36000	36000
KLO25-5869	SELENIUM, 24 HRS. URINE	3300	3300	3300
KLO25-5870	SELENIUM, SERUM	3300	3300	3300
KLO25-5871	SELENIUM, URINE	3300	3300	3300
KLO25-5872	SELLINUM	3100	3100	3100
KLO25-5873	SEMEN FISH (BS)	4800	4800	4800
KLO25-5874	SEMEN FOR FRUCTOSE	300	300	300
KLO25-5875	SEPSIS PANEL	5300	5300	5300
KLO25-5876	SEPSIS PANEL ,PCR	17500	17500	17500
KLO25-5877	SEQ - ABL GENE QUALITATIVE	1200	1200	1200
KLO25-5878	SEQ - ABL GENE QUANTITATIVE	1500	1500	1500
KLO25-5879	SEQ - B.PSEUDOMALIE QUALITATIVE	2000	2000	2000
KLO25-5880	SEQ - B.PSEUDOMALIE QUANTITATIVE	2400	2400	2400
KLO25-5881	SEQ - B-ACTIN QUANTITATIVE	1500	1500	1500
KLO25-5882	SEQ - CHIKANGUNYA (RNA DETECTION) QUALITATIVE	2000	2000	2000
KLO25-5883	SEQ - CHIKANGUNYA (VIRAL LOAD) QUANTITATIVE	2500	2500	2500
KLO25-5884	SEQ - CHLAMYDIA PNEUMONIA QUALITATIVE	2000	2000	2000
KLO25-5885	SEQ - CHLAMYDIA PNEUMONIA QUANTITATIVE	2400	2400	2400
KLO25-5886	SEQ - CHOCOLO VIRUS QUALITATIVE	2500	2500	2500
KLO25-5887	SEQ - CHOCOLO VIRUS QUANTITATIVE	3000	3000	3000
KLO25-5888	SEQ - CMV (DNA DETECTION) QUALITATIVE	1800	1800	1800
KLO25-5889	SEQ - CMV (VIRAL LOAD) QUANTITATIVE	2200	2200	2200
KLO25-5890	SEQ - DENGUE GENOTYPING 1,2,3,4	3000	3000	3000
KLO25-5891	SEQ - EBV (VIRAL LOAD) QUALITATIVE	2200	2200	2200
KLO25-5892	SEQ - EBV (VIRAL LOAD) QUANTITATIVE	2500	2500	2500

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5893	SEQ - ENTEROCOCCUS FACECALIS QUALITATIVE	2000	2000	2000
KLO25-5894	SEQ - ENTEROCOCCUS FACECALIS QUANTITATIVE	2400	2400	2400
KLO25-5895	SEQ - FACTOR V LEIDEN DETECTION	1500	1500	1500
KLO25-5896	SEQ - GAPDH QUANTITATIVE	1500	1500	1500
KLO25-5897	SEQ - h- TERT QUANTITATIVE	3000	3000	3000
KLO25-5898	SEQ - H3N2 & INFLUENZA GROUP A QUANTITATIVE	3500	3500	3500
KLO25-5899	SEQ - H5N1 (BIRD FLU)	5000	5000	5000
KLO25-5900	SEQ - HANTA VIRUS (VIRAL LOAD) QUALITATIVE	3000	3000	3000
KLO25-5901	SEQ - HAV (RNA DETECTION) QUALITATIVE	2000	2000	2000
KLO25-5902	SEQ - HELICOBACTER PYLORI QUALITATIVE	2000	2000	2000
KLO25-5903	SEQ - HELICOBACTER PYLORI QUANTITATIVE	2400	2400	2400
KLO25-5904	SEQ - HER-2 NEU DNA DETECTION & QUANTIFICATION	3000	3000	3000
KLO25-5905	SEQ - HHV6 (DNA DETECTION) QUALITATIVE	2000	2000	2000
KLO25-5906	SEQ - HHV6 (DNA DETECTION) QUANTITATIVE	2500	2500	2500
KLO25-5907	SEQ - HHV7 (DNA DETECTION) QUALITATIVE	2000	2000	2000
KLO25-5908	SEQ - HHV7 (DNA DETECTION) QUANTITATIVE	2500	2500	2500
KLO25-5909	SEQ - IFN-Y QUANTITATIVE	2400	2400	2400
KLO25-5910	SEQ - INFLUENZA GROUP A	2000	2000	2000
KLO25-5911	SEQ - INFLUENZA GROUP A & B QUALITATIVE	3000	3000	3000
KLO25-5912	SEQ - INFLUENZA GROUP A & B QUANTITATIVE	3500	3500	3500
KLO25-5913	SEQ - INFLUENZA GROUP B	2000	2000	2000
KLO25-5914	SEQ - KLEBSIELLA PNEUMONIA QUALITATIVE	2000	2000	2000
KLO25-5915	SEQ - KLEBSIELLA PNEUMONIA QUANTITATIVE	2400	2400	2400
KLO25-5916	SEQ - LEPROSY QUALITATIVE	2000	2000	2000
KLO25-5917	SEQ - LEPROSY QUANTITATIVE	2400	2400	2400
KLO25-5918	SEQ - LEPTOSPIRA (PATHOGENIC) QUALITATIVE	2000	2000	2000
KLO25-5919	SEQ - LEPTOSPIRA (PATHOGENIC) QUANTITATIVE	2400	2400	2400
KLO25-5920	SEQ - LISTERIA MONOCYTOGENES QUALITATIVE	1800	1800	1800
KLO25-5921	SEQ - LISTERIA MONOCYTOGENES QUANTITATIVE	2200	2200	2200
KLO25-5922	SEQ - MALARIA (P. FALCIPARUM) QUALITATIVE	1200	1200	1200
KLO25-5923	SEQ - MALARIA (P.FALCIPARUM) QUANTITATIVE	1500	1500	1500
KLO25-5924	SEQ - MALARIA (P.VIVAX) QUALITATIVE	1000	1000	1000
KLO25-5925	SEQ - MALARIA (P.VIVAX) QUANTITATIVE	1200	1200	1200
KLO25-5926	SEQ - MALASSEZIA SPECIES QUALITATIVE	2000	2000	2000
KLO25-5927	SEQ - MALASSEZIA SPECIES QUANTITATIVE	2400	2400	2400
KLO25-5928	SEQ - MEASLES VIRUS (RNA DETECTION) QUALITATIVE	2500	2500	2500
KLO25-5929	SEQ - MEASLES VIRUS (RNA DETECTION) QUANTITATIVE	3000	3000	3000
KLO25-5930	SEQ - MEXICAN H1N1 INFLUENZA GROUP A	4000	4000	4000
KLO25-5931	SEQ - MEXICAN H1N1 SWINE FLU	3500	3500	3500
KLO25-5932	SEQ - MYCOPLASMA PNEUMONIA QUALITATIVE	2000	2000	2000
KLO25-5933	SEQ - MYCOPLASMA PNEUMONIA QUANTITATIVE	2400	2400	2400
KLO25-5934	SEQ - MYCOPLASMA SPECIES QUALITATIVE	2000	2000	2000
KLO25-5935	SEQ - N. MENINGITIS QUALITATIVE	2000	2000	2000
KLO25-5936	SEQ - N. MENINGITIS QUANTITATIVE	2400	2400	2400

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5937	SEQ - PAN ENTERIC QUALITATIVE	1500	1500	1500
KLO25-5938	SEQ - PAN ENTERIC QUANTITATIVE	2000	2000	2000
KLO25-5939	SEQ - PML/RARA QUANTITATIVE	3000	3000	3000
KLO25-5940	SEQ - PP67 CMV(DNA DETECTION) QUALITATIVE	2000	2000	2000
KLO25-5941	SEQ - PP67 CMV(DNA DETECTION) QUANTITATIVE	2500	2500	2500
KLO25-5942	SEQ - PROTEUS VULGARIS QUALITATIVE	1800	1800	1800
KLO25-5943	SEQ - PROTEUS VULGARIS QUANTITATIVE	2200	2200	2200
KLO25-5944	SEQ - PSEUDOMONAS AERUGINOSA QUALITATIVE	1800	1800	1800
KLO25-5945	SEQ - PSEUDOMONAS AERUGINOSA QUANTITATIVE	2200	2200	2200
KLO25-5946	SEQ - RABIES (DNA DETECTION) QUALITATIVE	2000	2000	2000
KLO25-5947	SEQ - RABIES (VIRAL LOAD) QUALITATIVE	2500	2500	2500
KLO25-5948	SEQ - RUBELLA (DNA DETECTION) QUALITATIVE	2000	2000	2000
KLO25-5949	SEQ - RUBELLA (VIRAL LOAD) QUANTITATIVE	2500	2500	2500
KLO25-5950	SEQ - SALMONELLA TYPHI QUALITATIVE	1200	1200	1200
KLO25-5951	SEQ - SALMONELLA TYPHI QUANTITATIVE	1500	1500	1500
KLO25-5952	SEQ - SARS (RNA DETECTION) QUALITATIVE	2500	2500	2500
KLO25-5953	SEQ - SARS (VIRAL LOAD) QUANTITATIVE	3000	3000	3000
KLO25-5954	SEQ - SCRUB TYPUS QUALITATIVE	2000	2000	2000
KLO25-5955	SEQ - SCRUB TYPUS QUANTITATIVE	2400	2400	2400
KLO25-5956	SEQ - SHIGELLA DYSENTRICA QUALITATIVE	1500	1500	1500
KLO25-5957	SEQ - SHIGELLA DYSENTRICA QUANTITATIVE	2000	2000	2000
KLO25-5958	SEQ - STAPH AUREUS QUALITATIVE	2000	2000	2000
KLO25-5959	SEQ - STAPH AUREUS QUANTITATIVE	2200	2200	2200
KLO25-5960	SEQ - STERPTOCOCCUS MUTANS QUALITATIVE	2000	2000	2000
KLO25-5961	SEQ - STERPTOCOCCUS PNEUMONIA QUANTITATIVE	2400	2400	2400
KLO25-5962	SEQ - STREPTOCOCCUS MUTANS QUANTITATIVE	2400	2400	2400
KLO25-5963	SEQ - TNF ALPHA QUANTITATIVE	2400	2400	2400
KLO25-5964	SEQ - TTV (VIRAL LOAD) QUANTITATIVE	2000	2000	2000
KLO25-5965	SEQ - VIBRIO CHOLERAE - DETECTION & DIFFERENTIATION QUALITATIVE	2000	2000	2000
KLO25-5966	SEQ - VIBRIO CHOLERAE - DETECTION & DIFFERENTIATION QUANTITATIVE	2400	2400	2400
KLO25-5967	SEQ - WEST NILE VIRUS (RNA DETECTION) QUALITATIVE	2500	2500	2500
KLO25-5968	SEQ - WEST NILE VIRUS (VIRAL LOAD) QUANTITATIVE	3000	3000	3000
KLO25-5969	SEQ -B-GLOBIN QUANTITATIVE	1500	1500	1500
KLO25-5970	SEQ- CCL3-L1 QUANTITATIVE	2400	2400	2400
KLO25-5971	SEQ- CMLMRD1 QUANTITATIVE	3000	3000	3000
KLO25-5972	SEQ -ENTEROVIRUS (RNA DETECTION), QUANTITATIVE	2500	2500	2500
KLO25-5973	SEQ -H3N2 AND INFLUENZA GROUP A QUALITATIVE	3000	3000	3000
KLO25-5974	SEQ -H3N2 AND INFLUENZA GROUP A QUANTITATIVE	3500	3500	3500
KLO25-5975	SEQ -MTB COMPLEX/MOTT QUALITATIVE	1500	1500	1500
KLO25-5976	SERINE, SCREEN SERUM	7500	7500	7500
KLO25-5977	SERINE, SCREEN URINE	7500	7500	7500
KLO25-5978	SEROTONIN , RANDOM URINE	4900	4900	4900
KLO25-5979	SEROTONIN -5 HYDROXY TRYPTAMINE , SERUM	4900	4900	4900
KLO25-5980	SEROTONIN -5 HYDROXY TRYPTAMINE , URINE	4900	4900	4900

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-5981	SEROTONIN, (5 HYDROXYTRYPTAMINE)	12280	12280	12280
KLO25-5982	SEROTONIN-24 HOURS URINE	4500	4500	4500
KLO25-5983	SERTRALINE	5260	5260	5260
KLO25-5984	SERUM IgG 4	7000	7000	7000
KLO25-5985	SES ACUTE ENCEPHALITIC SYNDROME (AES)	21440	21440	21440
KLO25-5986	SES ACUTE PYREXIA	15980	15980	15980
KLO25-5987	SES ANTIBIOTIC RESISTANCE MARKERS	13660	13660	13660
KLO25-5988	SES COMMUNITY ACQUIRED PNEUMONIA	31290	31290	31290
KLO25-5989	SES MENINGITIS	13360	13360	13360
KLO25-5990	SES MENINGO ENCEPHALITIS	9490	9490	9490
KLO25-5991	SES PAN CNS	17600	17600	17600
KLO25-5992	SES POST TRANSPLANT/FEBRILE NEUTROPENIA/PENUMONIA + ANTIBIOTIC RESISTANCE MARKER	44600	44600	44600
KLO25-5993	SES POST-TRANSPLANT/FEBRILE NEUTROPENIA/PNEUMONIA	31290	31290	31290
KLO25-5994	SES RNA VRIUS	13200	13200	13200
KLO25-5995	SES SEPSIS	13660	13660	13660
KLO25-5996	SES SEPSIS + SES ANTIBIOTIC RESISTANCE MARKER	22250	22250	22250
KLO25-5997	SES TRANSPLANT VIRAL PANEL	9490	9490	9490
KLO25-5998	SEVERE COMBINED IMMUNODEFICIENCY (SCID) GENE PANEL (M)	36000	36000	36000
KLO25-5999	SEX HORMONE BINDING GLOBULIN	2500	2500	2500
KLO25-6000	SEXUALLY TRANSMITTED INFECTION	6600	6600	6600
KLO25-6001	SFLT PLGF RATIO (LI)	9000	9000	9000
KLO25-6002	SHIGELLA TOXINS,EIA	3190	3190	3190
KLO25-6003	SIALIDOSIS - LYSOSOMAL STORAGE DISORDER - NEU1 GENE ANALYSIS (M)	30000	30000	30000
KLO25-6004	SICKEL CELL ANEMIA (HbS) MUTATION ANALYSIS	3840	3840	3840
KLO25-6005	SICKEL CELL ANEMIA (HbS) MUTATION ANALYSIS, AMNIOTIC FLUID	8600	8600	8600
KLO25-6006	SICKLE CELL ANEMIA (HBB) GENE ANALYSIS (EXON 1) (M)	9300	9300	9300
KLO25-6007	SICKLE CELL ANEMIA MUTATION ANALYSIS	7480	7480	7480
KLO25-6008	SICKLE CELL ANEMIA MUTATION DETECTION	3200	3200	3200
KLO25-6009	SICKLE CELL ANEMIA, DNA PROBE ANALYSIS	3840	3840	3840
KLO25-6010	SICKLE CELL DISEASE MUTATION SCREENING (BS)	4200	4200	4200
KLO25-6011	SICKLE CELL MUTATION DETECTION,PRENATAL	7200	7200	7200
KLO25-6012	SICKLE CELL PRENATAL DIAGNOSIS, PCR	10750	10750	10750
KLO25-6013	SICKLE CELL TRIO PRENATAL MUTATION DETECTION	10600	10600	10600
KLO25-6014	SIDEROBLASTIC ANAEMIA GENE PANEL (M)	36000	36000	36000
KLO25-6015	SILICON SERUM/PLASMA	12830	12830	12830
KLO25-6016	SILVER NITROPRUSSIDE, URINE	120	120	120
KLO25-6017	SILVER, BLOOD OR URINE	5400	5400	5400
KLO25-6018	SINGLE VARIANT ANALYSIS (FETUS)-LI	9000	9000	9000
KLO25-6019	SIROLIMUS (RAPAMYCIN), LC-MS/MS	5000	5000	5000
KLO25-6020	SJOGREN-LARSSON SYNDROME (ALDH3A2) GENE ANALYSIS(M)	30000	30000	30000
KLO25-6021	SJOGRENS SYNDROME ANTIBODY	2500	2500	2500
KLO25-6022	SKELETAL DYSPLASIA GENE PANEL (M)	36000	36000	36000
KLO25-6023	SKELETAL DYSPLASIA PANEL - INDIVIDUAL	22000	22000	22000
KLO25-6024	SLC20A2 GENE SEQUENCING (M)	33000	33000	33000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6025	SMA (PRENATAL/POSTNATAL) RFLP BASED (G)	19500	19500	19500
KLO25-6026	SMA CARRIER DETECTION BY PCR -MLPA	7000	7000	7000
KLO25-6027	SMA MLPA	12000	12000	12000
KLO25-6028	SMALL DENSE LDL sdLDL	2650	2650	2650
KLO25-6029	SMITH-LEMLI-OPITZ SYNDROME (DHCR7) GENE ANALYSIS (M)	30000	30000	30000
KLO25-6030	SMITH-MAGNIS CHROMOSOME REGION PROBE (SMS) (17P11.2).(L)	6000	6000	6000
KLO25-6031	SMN1 GENE (SPINAL MUSCULAR ATROPHY) (BS)	8400	8400	8400
KLO25-6032	SODIUM:OSMOLALITY RATIO, SERUM	800	800	800
KLO25-6033	SOLUBLE TRANSFERRIN RECEPTOR Stfr	1700	1700	1700
KLO25-6034	SOMATIC CANCER MUTATION PANEL / HOT SPOT TUMOR PANEL (M)	30000	30000	30000
KLO25-6035	SOMATOMEDIN - C. IGF-1	4300	4300	4300
KLO25-6036	SOMATOSTATIN, PLASMA	14800	14800	14800
KLO25-6037	SOTOS SYNDROME (NSD1) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-6038	SOTOS SYNDROME GENE PANEL (M)	36000	36000	36000
KLO25-6039	SPECTRAL KARYOTYPING (SKY) -FISH	16000	16000	16000
KLO25-6040	SPERM DNA FRAGMENTATION	8000	8000	8000
KLO25-6041	SPERM DNA FRAGMENTATION (BS)	4800	4800	4800
KLO25-6042	SPHINGOLIPIDOSIS PANEL-1	9400	9400	9400
KLO25-6043	SPHINGOLIPIDOSIS PANEL-2	4400	4400	4400
KLO25-6044	SPHINGOLIPIDOSIS PANEL-3	5400	5400	5400
KLO25-6045	SPHINGOMYELIN- IgG PHOSPHOLIPID	1100	1100	1100
KLO25-6046	SPHINGOMYELIN- IgM PHOSPHOLIPID	1100	1100	1100
KLO25-6047	SPHINGOMYELINASE ENZYME ANALYSIS	5500	5500	5500
KLO25-6048	SPHINGOMYELINASE NIEMANN PICK DISEASE	10600	10600	10600
KLO25-6049	SPHINOGEMYELINASE, BLOOD	5500	5500	5500
KLO25-6050	SPINAL MUSCULAR ATROPHY (SMA), CARRIER DETECTION	4300	4300	4300
KLO25-6051	SPINAL MUSCULAR ATROPHY (SMA), MUTATION DETECTION	3200	3200	3200
KLO25-6052	SPINAL MUSCULAR ATROPHY (SMN1) GENE ANALYSIS (M)	18500	18500	18500
KLO25-6053	SPINAL MUSCULAR ATROPHY (SMN1/SMN2) DELETION/DUPLICATION ANALYSIS (M)	8000	8000	8000
KLO25-6054	SPINAL MUSCULAR ATROPHY MICRODELETION BY PCR	3000	3000	3000
KLO25-6055	SPINAL MUSCULAR ATROPHY MICRODELETION BY PCR, BLOOD	7200	7200	7200
KLO25-6056	SPINDLE CELL TUMOUR	8900	8900	8900
KLO25-6057	SPINO-BULBAR-MUSCULAR ATROPHY	8000	8000	8000
KLO25-6058	SPINOCEREBELLAR ATAXIA 1 (ATXN1) REPEAT EXPANSION ANALYSIS (M)	5000	5000	5000
KLO25-6059	SPINOCEREBELLAR ATAXIA 10 (ATXN10) REPEAT EXPANSION ANALYSIS (M)	5000	5000	5000
KLO25-6060	SPINOCEREBELLAR ATAXIA 12 (PPP2R2B) REPEAT EXPANSION ANALYSIS (M)	5000	5000	5000
KLO25-6061	SPINOCEREBELLAR ATAXIA 2 (ATXN2) REPEAT EXPANSION ANALYSIS (M)	5000	5000	5000
KLO25-6062	SPINOCEREBELLAR ATAXIA 3 (ATXN3) REPEAT EXPANSION ANALYSIS (M)	5000	5000	5000
KLO25-6063	SPINOCEREBELLAR ATAXIA 6 (CACNA1A) REPEAT EXPANSION ANALYSIS (M)	5000	5000	5000
KLO25-6064	SPINOCEREBELLAR ATAXIA 7 (ATXN7) REPEAT EXPANSION ANALYSIS (M)	5000	5000	5000
KLO25-6065	SPINOCEREBELLAR ATAXIA REPEAT EXPANSION ANALYSIS: ANY TWO OF (SCA1, SCA2, SCA3, SCA6, SCA7	8000	8000	8000
KLO25-6066	SPINOCEREBELLAR ATAXIA REPEAT EXPANSION ANALYSIS: SCA1, SCA2, SCA3, SCA12 (M)	15000	15000	15000
KLO25-6067	SPINOCEREBELLAR ATAXIA REPEAT EXPANSION ANALYSIS: SCA1, SCA2, SCA3, SCA6, SCA7, SCA10, SCA1	25000	25000	25000
KLO25-6068	SPUTUM EXAMINATION, AFB INCLUDES AURAMINE AND ZIEHL NEELSEN STAIN	400	400	400

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6069	SPUTUM EXAMINATION, OVA & PARASITES	130	130	130
KLO25-6070	SQUAMOUS CELL CARCINOMA ANTIGEN	5100	5100	5100
KLO25-6071	ST2 HEART FAILURE MARKER	1950	1950	1950
KLO25-6072	STATIN INDUCED MYOPATHY PREDISPOSITION SLCO1B1 P.(VAL174ALA) (M)	7000	7000	7000
KLO25-6073	STD DIAGNOSTIC PANEL	6200	6200	6200
KLO25-6074	STD PANEL	3000	3000	3000
KLO25-6075	STD PROFILE -1	3000	3000	3000
KLO25-6076	STD PROFILE -3	5000	5000	5000
KLO25-6077	STD PROFILE-2	3500	3500	3500
KLO25-6078	STEROID ANALYSIS	3000	3000	3000
KLO25-6079	STEROID PANEL -1	2700	2700	2700
KLO25-6080	STEROID PANEL 1,5 STEROIDS	3200	3200	3200
KLO25-6081	STEROID PANEL -2	3500	3500	3500
KLO25-6082	STEROID PANEL 2,8 STEROIDS	3800	3800	3800
KLO25-6083	STEROID PANEL -3	4000	4000	4000
KLO25-6084	STEROID PANEL 3,13 STEROIDS	4300	4300	4300
KLO25-6085	STEROID PANEL FOR CONGENITAL ADRENAL HYPERPLASIA	4300	4300	4300
KLO25-6086	STEROID PANEL FOR PCOS/ CAH DIFFERENTIATION	3200	3200	3200
KLO25-6087	STEROID PANEL FOR POLYCYSTIC OVARY SYNDORME (PCOS)	3200	3200	3200
KLO25-6088	STEROID PANEL FOR PREMATURE ADHRENARCHE	3200	3200	3200
KLO25-6089	STEROID PANEL,21 - HYDROXYLASE DEFICIENCY /STRESS	2700	2700	2700
KLO25-6090	STK11 GENE ANALYSIS (M)	15000	15000	15000
KLO25-6091	STONE ANALYSIS , URINARY STONE	1200	1200	1200
KLO25-6092	STOOL FOR ROTA VIRUS AG	1600	1600	1600
KLO25-6093	STOOL FOR SUDAN BLACK STAINING FOR FAT GLOBULES	1000	1000	1000
KLO25-6094	STRAITED/SKELETAL MUSCLE ANTIBODY, IFA	2000	2000	2000
KLO25-6095	STRAITED/SKELETAL MUSCLE ANTIBODY, IFA IN DILUTIONS	3000	3000	3000
KLO25-6096	STRANDX-CANCER (GERMLINE) SCREENING TEST	23100	23100	23100
KLO25-6097	STRANDX-CANCER (TUMOR) TEST	44100	44100	44100
KLO25-6098	STREPTOCOCCUS GROUP B ANTIGEN DETECTION	880	880	880
KLO25-6099	STREPTOZYME	5680	5680	5680
KLO25-6100	STRONTIUM,URINE	7080	7080	7080
KLO25-6101	SUBTELOMERIC DELETION/DUPLICATION PANEL (BS)	8400	8400	8400
KLO25-6102	SUCCINYLACETONE	3800	3800	3800
KLO25-6103	SUCROSE LYSIS TEST, SERUM & BLOOD	900	900	900
KLO25-6104	SUCROSELYSIS TEST	450	450	450
KLO25-6105	SUDAN BLACK B STAIN, BLOOD / BONE MARROW	490	490	490
KLO25-6106	SUDAN IV STAIN	550	550	550
KLO25-6107	SUGAR ADVANCED PANEL	3000	3000	3000
KLO25-6108	SUGAR BASIC PANEL	1300	1300	1300
KLO25-6109	SUGAR RISK PANEL	1000	1000	1000
KLO25-6110	SureT- 1 Embryo	20000	20000	20000
KLO25-6111	SureT- 2 Embryos	36000	36000	36000
KLO25-6112	SureT- 3 Embryos	51000	51000	51000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6113	SureT- 4 Embryos	60000	60000	60000
KLO25-6114	SureT- 5 Embryos	70000	70000	70000
KLO25-6115	SURFACE LIGHT CHAINS, FLOW CYTOMETRY	4950	4950	4950
KLO25-6116	SVA- Prenatal Sample + Couple (1 Variant)	25000	25000	25000
KLO25-6117	SVA-Prenatal + Couple (2 Variant)	40000	40000	40000
KLO25-6118	SYPHILIS COMPREHENSIVE PANEL	2450	2450	2450
KLO25-6119	SYPHILLIS ANTIBODIES, (TREPONEMA), SERUM	1530	1530	1530
KLO25-6120	Systemic Lupeous Erythematosus Panel	4500	4500	4500
KLO25-6121	SYSTEMIC SCLEROSIS PROFILE IGG	12100	12100	12100
KLO25-6122	SYSTEMIC SCLEROSIS PROFILE	4150	4150	4150
KLO25-6123	SYT GENE REARRANGEMENT t (X;18)	8600	8600	8600
KLO25-6124	T & B CELL GENE REARRANGEMENT DNA PROBE ANALYSIS	25960	25960	25960
KLO25-6125	T REGULATORY CELLS (TREGS)	10800	10800	10800
KLO25-6126	T3 FREE, TRACER DIALYSIS	4490	4490	4490
KLO25-6127	T3 REVERSE	14600	14600	14600
KLO25-6128	T4 ANTIBODY	13450	13450	13450
KLO25-6129	TA90 (MELANOMA-ASSICIATED ANTIGEN)	5130	5130	5130
KLO25-6130	TACROLIMUS (FK506) TROUGH	3900	3900	3900
KLO25-6131	TACROLIMUS (S)	4500	4500	4500
KLO25-6132	TACROLIMUS, GENOTYPING, PCR	5600	5600	5600
KLO25-6133	TAY-SACHS DISEASE (HEXA) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-6134	TAY-SACHS DISEASE (HEXA) GENE ANALYSIS (M)	33000	33000	33000
KLO25-6135	TB FINAL DIAGNOSIS	5850	5850	5850
KLO25-6136	TB LAMP,QUALITATIVE (LOOP MEDIATED ISOTHERMA AMPLIFICATION),DNA, MYCOBACTERIUM TUBERCULC	1500	1500	1500
KLO25-6137	TB, DRUG RESISTANCE MUTATION STUDY	6160	6160	6160
KLO25-6138	TBE ANTIBODIES TICKBORNE ENCEPHALITIS, ANTIBODIES	7990	7990	7990
KLO25-6139	TBG, THYROXINE BINDING GLOBULIN	9000	9000	9000
KLO25-6140	TBII, THYROTROPIN BINDNG INHIBITORY IMMUNOGLOBULIN	13270	13270	13270
KLO25-6141	TBX1(22Q11.2). (L)	6000	6000	6000
KLO25-6142	TBX1..(L)	6000	6000	6000
KLO25-6143	T-CELL CLONALITY PANEL, TCRG, TCRB-PCR	14000	14000	14000
KLO25-6144	T-CELL GENE REARRANGEMENT PCR	20000	20000	20000
KLO25-6145	T-CELL RECEPTOR (TCR) GENE REARRANGEMENT QUALITATIVE	6410	6410	6410
KLO25-6146	TCR-ALPHA BETA , BLOOD	2300	2300	2300
KLO25-6147	TCR-GAMMA DELTA, BLOOD	2300	2300	2300
KLO25-6148	TDT (NUCLEAR)	3500	3500	3500
KLO25-6149	TEICHOIC ACID ANTIBODY	2300	2300	2300
KLO25-6150	TELVYSION 1P. (L)	6000	6000	6000
KLO25-6151	TELVYSION 4P. (L)	6000	6000	6000
KLO25-6152	Tenofovir Plasma	15000	15000	15000
KLO25-6153	TESTOSTERONE (BIOAVAILABLE)	2300	2300	2300
KLO25-6154	TESTOSTERONE (FREE)	2000	2000	2000
KLO25-6155	TESTOSTERONE FREE, BIOAVAILABLE & TOTAL	14200	14200	14200
KLO25-6156	TESTOSTERONE PANEL, TOTAL & FREE	2420	2420	2420

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6157	TESTOSTERONE STIMULATION BY HCG	1260	1260	1260
KLO25-6158	TESTOSTERONE, FREE & SEX HORMONE BINDING GLOBULIN	4000	4000	4000
KLO25-6159	TETANUS - TOXID- IgG QUANTITATIVE	2700	2700	2700
KLO25-6160	TETANUS ANTITOXOID ANTIBODY IGG	6840	6840	6840
KLO25-6161	TFE3	2300	2300	2300
KLO25-6162	THALASSAEMIA SCREENING (BS)	4200	4200	4200
KLO25-6163	THALASSEMIA ALPHA TRIO PRENATAL MUTATION DETECTION	12000	12000	12000
KLO25-6164	THALASSEMIA, BETA MUTATION ANALYSIS	18500	18500	18500
KLO25-6165	THALASSEMIA, BETA MUTATION ANALYSIS . (L)	5900	5900	5900
KLO25-6166	THALASSEMIA-BETA (5 COMMON MUTATIONS), BLOOD	2500	2500	2500
KLO25-6167	THALASSEMIA-BETA (COMPLETE SET OF 23 LOCI),AMNIOTIC FLUID	10000	10000	10000
KLO25-6168	THALASSEMIA-BETA (COMPLETE SET OF 23 LOCI),BLOOD	8000	8000	8000
KLO25-6169	THALLIUM (RANDOM), URINE	3300	3300	3300
KLO25-6170	THALLIUM BLOOD	3300	3300	3300
KLO25-6171	THALLIUM, 24 HRS. URINE	3300	3300	3300
KLO25-6172	THIOPHYLINE LEVEL	1100	1100	1100
KLO25-6173	THIORIDAZINE	5570	5570	5570
KLO25-6174	THREONINE , QUANTITATIVE ,SERUM	7500	7500	7500
KLO25-6175	THREONINE , QUANTITATIVE ,URINE 24 HOURS	7500	7500	7500
KLO25-6176	THREONINE, SCREEN (SERUM OR BLOOD)	7500	7500	7500
KLO25-6177	THROMBIN TIME	1220	1220	1220
KLO25-6178	THROMBOCHECK PANEL	17500	17500	17500
KLO25-6179	THROMBOCHECK TOTAL	21500	21500	21500
KLO25-6180	THROMBOPHILIA COMPREHENSIVE PROFILE	17800	17800	17800
KLO25-6181	THROMBOPHILIA PROFILE	16200	16200	16200
KLO25-6182	THROMBOPHILIA PROFILE -1	16500	16500	16500
KLO25-6183	THROMBOPHILIA PROFILE -2	9500	9500	9500
KLO25-6184	THROMBOPHILIA SCREENING PROFILE	17000	17000	17000
KLO25-6185	THROMBOPHILIA SCREENING PROFILE - 2	21900	21900	21900
KLO25-6186	THROMBOPHILIA TOTAL PROFILE	23200	23200	23200
KLO25-6187	THROMBOPHILLIA PANEL (G)	4550	4550	4550
KLO25-6188	THROMBOTIC PROFILE	15500	15500	15500
KLO25-6189	THROMBOTIC RISK DNA PANEL	14000	14000	14000
KLO25-6190	THROMBOTIC RISK SCREEN	14000	14000	14000
KLO25-6191	THROMBOTIC THROMBOCYTOPENIC PURPURA (TTP) - ADAMTS13 GENE ANALYSIS (M)	30000	30000	30000
KLO25-6192	THYROGLOBULIN	1900	1900	1900
KLO25-6193	THYROGLOBULIN; TG CANCER MARKER	1900	1900	1900
KLO25-6194	TISSUE CROSSMATCHING	3400	3400	3400
KLO25-6195	TISSUE TRANSGLUTAMINASE (TTG) ANTIBODIES (IGG)	1000	1000	1000
KLO25-6196	TISSUE TRANSGLUTAMINASE-TTG , DGP SCREEN	2100	2100	2100
KLO25-6197	TLE1 (1F5)	2300	2300	2300
KLO25-6198	TMPRSS6 GENE ANALYSIS (IRON DEFICIENCY ANEMIA) (M)	30000	30000	30000
KLO25-6199	TNF- ALPHA TUMOR NECROSIS FACTOR	4200	4200	4200
KLO25-6200	TOBRAMYCIN	6140	6140	6140

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6201	TOPIRMATE	8700	8700	8700
KLO25-6202	TORCH , CHORIONIC VILLUS- PCR	7090	7090	7090
KLO25-6203	TORCH , URINE- PCR	7090	7090	7090
KLO25-6204	TORCH , AMNIOTIC FLUID - PCR	7800	7800	7800
KLO25-6205	TORCH , CSF- PCR	7500	7500	7500
KLO25-6206	TORCH 5 - IgM	2000	2000	2000
KLO25-6207	TORCH 5 -IgG	2000	2000	2000
KLO25-6208	TORCH PANEL (BS)	4800	4800	4800
KLO25-6209	TORCH PANEL IGG & IGM	2900	2900	2900
KLO25-6210	TORCH PANEL ON AMNIOTIC FLUID (M)	10000	10000	10000
KLO25-6211	TORCH PANEL, AVIDITY	1500	1500	1500
KLO25-6212	TORCH, BY PCR	6000	6000	6000
KLO25-6213	TORCH, PANEL AVIDITY IgG	1500	1500	1500
KLO25-6214	TORCH, PCR, BLOOD	8800	8800	8800
KLO25-6215	TOTAL P1NP	1600	1600	1600
KLO25-6216	TOXOPLASMA IGG ADVANTAGE	1200	1200	1200
KLO25-6217	TOXOPLASMA QUALITATIVE (BS)	1680	1680	1680
KLO25-6218	TOXOPLASMA, AVIDITY IgG	640	640	640
KLO25-6219	TOXOPLASMA, IGG - AVIDITY (L)	640	640	640
KLO25-6220	TOXOPLASMA-DNA DETECTION, BLOOD	3820	3820	3820
KLO25-6221	TOXOPLASMA-DNA DETECTION, CHORIONIC VILLUS	3820	3820	3820
KLO25-6222	TOXOPLASMA-DNA DETECTION, CSF	3820	3820	3820
KLO25-6223	TOXOPLASMA-DNA DETECTION, URINE	3820	3820	3820
KLO25-6224	TOXOPLASMA-DNA DETECTION,AMNIOTIC FLUID	3600	3600	3600
KLO25-6225	TP53 - CONFIRM – NGS WITH SIMULTANEOUS MLPA (M)	40000	40000	40000
KLO25-6226	TP53 - REFLEX – NGS FOLLOWED BY MLPA (IF NGS IS NEGATIVE) (M)	36000	36000	36000
KLO25-6227	TP53 GENE ANALYSIS (M)	30000	30000	30000
KLO25-6228	TP53 GENE LARGE DELETION/DUPLICATION ANALYSIS - MLPA (M)	20000	20000	20000
KLO25-6229	TPMT (THIOPURIME METHYL TRANSFERASE) ENZYME ACTIVITY, BLOOD	5600	5600	5600
KLO25-6230	TPMT (THIOPURINE METHYL TRANSFERASE), MUTATION, PCR	6300	6300	6300
KLO25-6231	TPMT GENOTYPING MUTATION DETECTION PANEL	13200	13200	13200
KLO25-6232	TRANSFERIN RECEPTOR SOLUBLE,SERUM	1700	1700	1700
KLO25-6233	TRANSFERRIN LEVEL	1200	1200	1200
KLO25-6234	TRANSPLANT INFECTION PANLEL, PCR	41000	41000	41000
KLO25-6235	TRANSPLANT INFECTIOUS SCREENING PROFILE	13000	13000	13000
KLO25-6236	TRANSSPOT	32000	32000	32000
KLO25-6237	TRAZODONE	7200	7200	7200
KLO25-6238	TRICYCLIC ANTIDEPRESSABTS, QUALITITATIVE	480	480	480
KLO25-6239	TRICYCLIC ANTIDEPRESSANTS SCREEN	9200	9200	9200
KLO25-6240	TRIMIPRAMINE (SURMONTIL)	7700	7700	7700
KLO25-6241	TRIO - WHOLE EXOME SEQUENCING - 45-50MB (80-100X) (M)	50000	50000	50000
KLO25-6242	TRIO - WHOLE EXOME SEQUENCING (80-100x) (M)	55000	55000	55000
KLO25-6243	TRIO ANALYSIS-PRENATAL BETA THALASSEMIA ANALYSIS (BS)	14000	14000	14000
KLO25-6244	TRIO ANALYSIS-PRENATAL SICKLE ELL DISEASE (BS)	10000	10000	10000

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6245	TRIO BETA THALASSEMIA SEQUENCING (BS)	10000	10000	10000
KLO25-6246	TRIO REFLEX - CLINICAL EXOME SEQUENCING - 20MB (80-100X) (M)	90000	90000	90000
KLO25-6247	TRIPEPTIDYL PEPTIDASE 1	5830	5830	5830
KLO25-6248	TRIPLE TEST (DOWN SYNDROME RISK SCREENING PANEL)	2900	2900	2900
KLO25-6249	TRYPANOSOMA CRUZI IgG	2100	2100	2100
KLO25-6250	TRYPSIN	8100	8100	8100
KLO25-6251	TRYPTASE	10800	10800	10800
KLO25-6252	TRYPTOPHAN QUANTITATIVE	13900	13900	13900
KLO25-6253	TSC1 & TSC2 GENE (M)	15120	15120	15120
KLO25-6254	TSC1 & TSC2 GENE ANALYSIS (BS)	42000	42000	42000
KLO25-6255	TSC1 DELETION/DUPLICATION ANALYSIS (M)	12000	12000	12000
KLO25-6256	TSC1 GENE (M)	7560	7560	7560
KLO25-6257	TSC2 DELETION/DUPLICATION ANALYSIS (M)	12000	12000	12000
KLO25-6258	TSC2 GENE (M)	7560	7560	7560
KLO25-6259	TSH RECEPTOR ANTIBODY	4100	4100	4100
KLO25-6260	TSH RECEPTOR ANTIBODY, SERUM	4100	4100	4100
KLO25-6261	TSH STIMULATION BY TRH (THYROTROPONIN RELEASING HORMONE)	1100	1100	1100
KLO25-6262	TSH, NEWBORN SCREEN	250	250	250
KLO25-6263	TSI & TBII (THYROID IMMUNOGLOBULIN/BINDING INHIBITROY IMMUO)	24670	24670	24670
KLO25-6264	TSI (THYROID STIMULATING IMMUNOGLOBULIN)	22900	22900	22900
KLO25-6265	TUBERCULOSIS QUALITATIVE (BS)	1440	1440	1440
KLO25-6266	TUBULAR REABSORPTION OF PHOSPHATE, TRP	520	520	520
KLO25-6267	TULAREMIA ANTIBODY	5100	5100	5100
KLO25-6268	TUMOR NECROSIS FACTOR	4580	4580	4580
KLO25-6269	TYPHOID DNA DTECTION , PCR	8300	8300	8300
KLO25-6270	TYPHUS FEVER (RICKETTSIA) ANTIBODIES, IgG & IgM -USA	7420	7420	7420
KLO25-6271	TYROSINE, QUANTITATIVE	7500	7500	7500
KLO25-6272	TYROSINE, QUANTITATIVE PLASMA	17500	17500	17500
KLO25-6273	TYROSINEMIA GENE ANALYSIS (M)	30000	30000	30000
KLO25-6274	TYSABRI ANTIBODIES, ELISA	5470	5470	5470
KLO25-6275	TZANCK SMEARM VESISCLE FLUID	450	450	450
KLO25-6276	U1 RNP ANTIBODIES	1900	1900	1900
KLO25-6277	UGT1A1 GENE POLYMORPHISM	5900	5900	5900
KLO25-6278	UGT1A1 GENE POLYMORPHISM DETECTION , PCR	7200	7200	7200
KLO25-6279	Universal Genetic Testing (UGT)	46000	46000	46000
KLO25-6280	UREA CYCLE DEFECTS GENE PANEL (M)	36000	36000	36000
KLO25-6281	UREA CYCLE DISORDER PROFILE	7800	7800	7800
KLO25-6282	URINARY GLYCOSAMINOGLYCAN (GAG) QUANTITATION	3200	3200	3200
KLO25-6283	URINE - DRUG ABUSE PANEL - 6 DRUGS	2800	2800	2800
KLO25-6284	UROPLAKIN	2300	2300	2300
KLO25-6285	USHER SYNDROME (USH2A) DELETION/DUPLICATION ANALYSIS (M)	20000	20000	20000
KLO25-6286	USHER SYNDROME GENE PANEL (M)	33000	33000	33000
KLO25-6287	VALPORIC ACID	900	900	900
KLO25-6288	VALPROIC ACID, TOTAL	3240	3240	3240

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6289	VANADIUM, SERUM/PLASMA	10510	10510	10510
KLO25-6290	VANCOMYCIN RESISTANT ENTERCOCCI (VRE) SCREENING	900	900	900
KLO25-6291	VANCOMYCIN LEVEL	4750	4750	4750
KLO25-6292	VARICELLA ZOSTER PCR (LI)	3500	3500	3500
KLO25-6293	VARICELLA ZOSTER VIRUS ANTIBODY (IgG)	1300	1300	1300
KLO25-6294	VARICELLA ZOSTER VIRUS IGM ANTIBODY(VZV)	1300	1300	1300
KLO25-6295	VARICELLA ZOSTER VIRUS QUALITATIVE DETECTION (BS)	3600	3600	3600
KLO25-6296	VARICELLA ZOSTER VIRUS, DNA DETECION PCR	3200	3200	3200
KLO25-6297	VASOACTIVE INTSTINAL POLYPEPTIDE, VIP	18200	18200	18200
KLO25-6298	VASOPRESSIN (ADH-ANTI DIURETIC HORMONE), PLASMA	5200	5200	5200
KLO25-6299	VENOUS THROMBOSIS RISK ANALYSIS PANEL	5900	5900	5900
KLO25-6300	VGCC ANTIBODY	20130	20130	20130
KLO25-6301	VIII INTRON 22 AND INTRON 1 INVERSION (BS)	9600	9600	9600
KLO25-6302	VISCOSITY	5750	5750	5750
KLO25-6303	VISUAL AUTOPSY	1500	1500	1500
KLO25-6304	VITAMIN A, RETINOL	4300	4300	4300
KLO25-6305	VITAMIN A, TRANS RETINOL .	4000	4000	4000
KLO25-6306	VITAMIN B1 PLASMA, THIAMINE PLASMA	8000	8000	8000
KLO25-6307	VITAMIN B1- THIAMINE WHOLE BLOOD	4300	4300	4300
KLO25-6308	VITAMIN B12 , ACTIVE HOLO TRANSCOBALAMIN	1800	1800	1800
KLO25-6309	VITAMIN B12 BINDNG CAPACITY UNSATURATED TRANSCOBALAMIN	10290	10290	10290
KLO25-6310	VITAMIN B2 PLASMA	4500	4500	4500
KLO25-6311	Vitamin B2 Riboflavin (FAD)	3800	3800	3800
KLO25-6312	VITAMIN B6	4300	4300	4300
KLO25-6313	VITAMIN B6 PYRIDOXAL 5-PHOSPHATE (PLP)	4300	4300	4300
KLO25-6314	VITAMIN C	8900	8900	8900
KLO25-6315	VITAMIN C. (ABSORBIC ACID)	4000	4000	4000
KLO25-6316	VITAMIN D COMPREHENSIVE	2400	2400	2400
KLO25-6317	VITAMIN D, GOLD	2500	2500	2500
KLO25-6318	VITAMIN D,ULTRASENSITIVE	2000	2000	2000
KLO25-6319	VITAMIN D-1,25 - DIHYDROXY	3500	3500	3500
KLO25-6320	VITAMIN E SERUM TOCOPHEROL	4300	4300	4300
KLO25-6321	VITAMIN K PLASMA	13530	13530	13530
KLO25-6322	VITAMIN K1	6000	6000	6000
KLO25-6323	VITAMIN PROFILE, EXTENDED	8600	8600	8600
KLO25-6324	VITAMIN SCREEN	2100	2100	2100
KLO25-6325	VMA (VANILMANDELIC ACID) , RANDOM URINE	3800	3800	3800
KLO25-6326	VMA, 24 HRS. URINE	3800	3800	3800
KLO25-6327	VNTR CHIMERISM STUDY (BS)	6000	6000	6000
KLO25-6328	VOLTAGE GATTED POTASSIUM CHANNEL (USA)	40740	40740	40740
KLO25-6329	VON HIPPEL-LINDAU SYNDROME (VHL) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-6330	VON HIPPEL-LINDAU SYNDROME (VHL) GENE ANALYSIS - NGS (M)	30000	30000	30000
KLO25-6331	VON WILLEBRAND DISEASE (VWF) GENE ANALYSIS (M)	30000	30000	30000
KLO25-6332	VON WILLEBRAND FACTOR ANTIGEN (vWF)	10700	10700	10700

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6333	VORICONAZOLE	5670	5670	5670
KLO25-6334	VW- VON WILLEBRAND ANTIGEN CITRATED PLASMA	10800	10800	10800
KLO25-6335	VZV PCR	3270	3270	3270
KLO25-6336	WAARDENBURG SYNDROME GENE PANEL (M)	33000	33000	33000
KLO25-6337	WAGR SYNDROME (PAX6) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-6338	WARFARIN DOSAGE-VKORC1 (C.-1639 G>A), CYP2C9*2,CYP2C9*3 & CYP2C9*13 (M)	6700	6700	6700
KLO25-6339	WARFARIN DOSAGE-VKORC1 (C.-1639 G>A), CYP2C9*2,CYP2C9*3 & CYP2C9*13 (M).	12200	12200	12200
KLO25-6340	WARFARIN SENSITIVITY DETECTION	14980	14980	14980
KLO25-6341	WARFARIN THERAPEUTIC RESPONSE PREDICTIVE (BS)	4800	4800	4800
KLO25-6342	WAS (WISKOTT ALDRICH SYNDROME) GENE ANALYSIS. (M)	36000	36000	36000
KLO25-6343	WATER CHEMICAL ANALYSIS	1460	1460	1460
KLO25-6344	WEIL FELIX TEST	900	900	900
KLO25-6345	WEST NILE VIRUS ANTIBODIES (IGG, IGM), SERUM	5410	5410	5410
KLO25-6346	WEST NILE VIRUS -IgG	3550	3550	3550
KLO25-6347	WEST NILE VIRUS -IgM	3550	3550	3550
KLO25-6348	WEST NILE VIRUS -PCR	5450	5450	5450
KLO25-6349	WHOLE EXOME SEQUENCING (G)	62500	62500	62500
KLO25-6350	WHOLE EXOME SEQUENCING - 50MB(80-100X) (M)	20000	20000	20000
KLO25-6351	WHOLE EXOME SEQUENCING (80-100x) (M)	25500	25500	25500
KLO25-6352	WHOLE EXOME SEQUENCING (BS)	40000	40000	40000
KLO25-6353	WHOLE EXOME SEQUENCING (WES) 80-100x (SN)	16000	16000	16000
KLO25-6354	WHOLE EXOME SEQUENCING + MCC (BS)	17000	17000	17000
KLO25-6355	Whole Exome Sequencing- Duo	55000	55000	55000
KLO25-6356	Whole Exome Sequencing- Trio	75000	75000	75000
KLO25-6357	WHOLE GENOME SEQUENCING (MEAN 30X) (M)	71000	71000	71000
KLO25-6358	WHOLE MITOCHONDRIAL GENOME SEQUENCING (M)	21000	21000	21000
KLO25-6359	WILLIAMS SYNDROME (7P11.23).(L)	6400	6400	6400
KLO25-6360	WILLIAM'S SYNDROME (BS)	6600	6600	6600
KLO25-6361	WILLIAMS-BEUREN SYNDROME DELETION/DUPLICATION ANALYSIS (M)	25000	25000	25000
KLO25-6362	WILLSON DISEASE PANEL	4580	4580	4580
KLO25-6363	WILSON DISEASE	50400	50400	50400
KLO25-6364	WILSON DISEASE (ATP7B) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-6365	WILSON DISEASE (ATP7B) GENE ANALYSIS (M)	42000	42000	42000
KLO25-6366	WOLF-HIRSCHHORN SYNDROME (WHS) (4P-)	6000	6000	6000
KLO25-6367	WOMEN HEREDITARY CANCER BREAST, OVARY, ENDOMETRIUM	45500	45500	45500
KLO25-6368	WT-1 MUTATION DETECTION	9060	9060	9060
KLO25-6369	XANTHINURIA (XDH) GENE ANALYSIS (M)	30000	30000	30000
KLO25-6370	XDR-TB PANEL	6650	6650	6650
KLO25-6371	XERODERMA PIGMENTOSUM GENE PANEL (M)	36000	36000	36000
KLO25-6372	X-LINKED MENTAL RETARDATION GENE PANEL (M)	36000	36000	36000
KLO25-6373	X-LINKED SPASTIC PARAPLEGIA-2 (PLP1) DELETION/DUPLICATION ANALYSIS (M)	15000	15000	15000
KLO25-6374	XPERT PLUS	2750	2750	2750
KLO25-6375	Y CHROMOSOME MICRODELETION (16 (BS)	4550	4550	4550
KLO25-6376	Y CHROMOSOME MICRODELETION (16 MUT)	6900	6900	6900

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KLO25-6377	Y- CHROMOSOME MICRODELETION DETECTION ,PCR	7000	7000	7000
KLO25-6378	YEAST (CANDIDA SPECIES) IDENTIFICATION	1100	1100	1100
KLO25-6379	YERSINIA ENTERCOLITICA-IGM SERUM	3000	3000	3000
KLO25-6380	YERSINIA ENTEROCOLITICA ANTIGEN	1640	1640	1640
KLO25-6381	YERSINIA ENTEROCOLITICA-IGG, SERUM	1580	1580	1580
KLO25-6382	YMDD MUTATION DETECTION, BLOOD PCR	4600	4600	4600
KLO25-6383	ZIKA QUALITATIVE RNA PCR	7090	7090	7090
KLO25-6384	ZIKA VIRUS ANTIBODY IGM	1800	1800	1800
KLO25-6385	ZIKA VIRUS PCR	7500	7500	7500
KLO25-6386	ZINC	2000	2000	2000
KLO25-6387	ZINC, 24 HRS. URINE	2000	2000	2000
KLO25-6388	ZINC, URINE RANDOM	2000	2000	2000
KLO25-6389	ZNT8 (ZINC TRANSPORTER 8) ANTIBODY	4300	4300	4300
KLO25-6390	ZYROP PANEL-1	220	220	220
KLO25-6391	ZYROP PANEL-3	640	640	640

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-6392	ACUTE HEPATITIS PROFILE	6520	6520	6520
	ANTI HAV (Hepatitis A. Virus) IGM HEPATITIS B CORE IGM (ANTI HBC AB IGM) HEPATITIS B SURFACE ANTIGEN, HBsAg - RAPID HEPATITIS C ANTIBODY, HCV ANTIBODY - RAPID HEPATITIS E ANTIBODY IgM (HEV IGM)			
KL25-6393	ANAEMIA PROFILE -I (MICROCYTIC ANAEMIA)	5320	5320	5320
	COMPLETE BLOOD COUNT (C.B.C) PERIPHERAL SMEAR (P.S.) IRON + TIBC (IRON/TIBC) PROTEIN STUDIES (T D A/G RATIO) C-REACTIVE PROTEIN (QUALITATIVE) ELECTROPHORESIS, HB / HPLC FERRITIN RETICULOCYTE COUNT STOOL OCCULT BLOOD			
KL25-6394	ANAEMIA PROFILE -II (MACROCYTIC ANAEMIA)	4700	4700	4700
	COMPLETE BLOOD COUNT (C.B.C) PERIPHERAL SMEAR (P.S.) FOLATE RETICULOCYTE COUNT VITAMIN B-12 LEVEL LDH (LACTIC DEHYDROGENASE)			
KL25-6395	ANTENATAL PROFILE I	2900	2900	2900
	BLOOD GROUPING & RH TYPING BLOOD SUGAR (FASTING) COMPLETE BLOOD COUNT (C.B.C) HEPATITIS B SURFACE ANTIGEN, HBsAg - RAPID HIV (AIDS) ANTIBODY I & II (HIV) - RAPID TSH (THYROID STIMULATING HORMONE) ULTRASENSITIVE URINE ROUTINE VDRL			
KL25-6396	ANTENATAL PROFILE II	10050	10050	10050
	BLOOD GROUPING & RH TYPING BLOOD SUGAR (FASTING) COMPLETE BLOOD COUNT (C.B.C) DUAL TEST (1ST TRIMESTER) SCREENING ELECTROPHORESIS, HB / HPLC HEPATITIS B SURFACE ANTIGEN, HBsAg - RAPID HIV (AIDS) ANTIBODY I & II (HIV) - RAPID TORCH [IgG] TORCH [IgM] TSH (THYROID STIMULATING HORMONE) ULTRASENSITIVE URINE ROUTINE VDRL			
KL25-6397	ARTHRITIS PANEL BASIC	2730	2730	2730
	COMPLETE BLOOD COUNT (C.B.C) ESR (Westergrens) AUTOMATED RA FACTOR URIC ACID ASO TITRE, QUANTITATIVE C-REACTIVE PROTEIN (CRP - QUANTITATIVE)			
KL25-6398	ARTHRITIS PANEL I	6540	6540	6540
	ANTI CYCLIC CITRULLINATED PEPTIDE ANTI NUCLEAR ANTIBODY (ANA) COMPLETE BLOOD COUNT (C.B.C) ESR (Westergrens) AUTOMATED RA FACTOR SGOT (AST) SGPT (ALT) UREA (BLOOD) URIC ACID URINE ROUTINE ASO TITRE, QUANTITATIVE C-REACTIVE PROTEIN (CRP - QUANTITATIVE)			
KL25-6399	BILE SALT & BILE PIGMENT	300	300	300
	BILE PIGMENT (B.P.) BILE SALT (B.S.)			

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-6400	BLOOD SUGAR FASTING & PP	260	260	260
	BLOOD SUGAR (FASTING) BLOOD SUGAR P.P			
KL25-6401	BOH PANEL	10370	10370	10370
	ANTI CARDIOLIPIN ANTIBODY (IGG) ANTI CARDIOLIPIN ANTIBODY (IGM) ANTI PHOSPHOLIPID ANTIBODY IGG ANTI PHOSPHOLIPID ANTIBODY IGM BLOOD SUGAR (FASTING) BLOOD SUGAR P.P GLYCOSYLATED HAEMOGLOBIN (Hb A1c) LUPUS ANTICOAGULANT (PTT-LA) TORCH [IgG] TORCH [IgM] TSH (THYROID STIMULATING HORMONE) ULTRASENSITIVE			
KL25-6402	CARDIAC PROFILE	2190	2190	2190
	CPK (CREATINE PHOPHOKINASE) CPK-MB (CREATINE PHOSPHOKINASE - MB) LDH (LACTIC DEHYDROGENASE) SGOT (AST)			
KL25-6403	COAGULATION PROFILE-1(WITHOUT FAC-VIII)	3000	3000	3000
	COMPLETE BLOOD COUNT (C.B.C) PERIPHERAL SMEAR (P.S.) PROTHROMBIN TIME (PT+INR) PT+PTI+INR PTTK (APTT) TIME TEST/CONTROL THROMBIN TIME			
KL25-6404	COMPLETE BLOOD COUNT & ESR	620	620	620
	COMPLETE BLOOD COUNT (C.B.C) ESR (Westergrens) AUTOMATED			
KL25-6405	COMPLETE BODY PROFILE I	4100	4100	4100
	BLOOD GROUPING & RH TYPING BLOOD SUGAR (FASTING) BLOOD SUGAR P.P COMPLETE BLOOD COUNT (C.B.C) ESR (Westergrens) AUTOMATED KIDNEY FUNCTION TEST(KFT) LIPID PROFILE LIVER FUNCTION TEST STOOL ROUTINE URINE ROUTINE			
KL25-6406	COMPLETE BODY PROFILE II	5240	5240	5240
	BLOOD GROUPING & RH TYPING BLOOD SUGAR (FASTING) BLOOD SUGAR P.P COMPLETE BLOOD COUNT (C.B.C) ESR (Westergrens) AUTOMATED KIDNEY FUNCTION TEST(KFT) LIPID PROFILE LIVER FUNCTION TEST STOOL ROUTINE URINE ROUTINE T3 (TRIIODOTHYRONINE) T4 (THYROXINE) TSH (THYROID STIMULATING HORMONE) ULTRASENSITIVE			
KL25-6407	DIABETIC PROFILE	2890	2890	2890
	BLOOD SUGAR (FASTING) BLOOD SUGAR P.P CREATININE GLYCOSYLATED HAEMOGLOBIN (Hb A1c) SUGAR (FASTING), URINE SUGAR (P.P.), URINE MICROALBUMIN, 24 HRS. URINE CHOLESTEROL (TOTAL) TRIGLYCERIDE			

LAB MEDICINE

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KL25-6408	FEVER PANEL I	1900	1900	1900
	COMPLETE BLOOD COUNT (C.B.C) ESR (Westergrens) AUTOMATED URINE ROUTINE WIDAL TEST RAPID TEST FOR MALARIAL ANTIGEN			
KL25-6409	FEVER PANEL II	5790	5790	5790
	BILIRUBIN, TOTAL (T+D+I) COMPLETE BLOOD COUNT (C.B.C) ESR (Westergrens) AUTOMATED PERIPHERAL SMEAR (P.S.) RAPID TEST FOR MALARIAL ANTIGEN SGPT (ALT) TYPHI DOT (IGG/IGM) URINE ROUTINE CULTURE, BLOOD (RAPID) CULTURE, URINE (RAPID)			
KL25-6410	HEPATITIS B PROFILE	5660	5660	5660
	HEPATITIS B CORE IGM (ANTI HBC AB IGM) HEPATITIS BE ANTIGEN (HBE AG) HBSAB HEPATITIS B SURFACE ANTIGEN, HBsAg - RAPID HEPATITIS B ANTIBODY, ANTI HBe ANTIBODY (HEPATITIS B)			
KL25-6411	ICU PROFILE - I	10850	10850	10850
	ABG, ARTERIAL BLOOD GAS BLOOD GROUPING & RH TYPING BLOOD SUGAR RANDOM (SUGAR R) COMPLETE BLOOD COUNT (C.B.C) ECG (RESTING) HEPATITIS B SURFACE ANTIGEN, HBsAg - RAPID HEPATITIS C ANTIBODY, HCV ANTIBODY - RAPID HIV (AIDS) ANTIBODY I & II (HIV) - RAPID KIDNEY FUNCTION TEST(KFT) LIVER FUNCTION TEST PROTHROMBIN TIME (PT+INR) PT+PTI+INR URINE ROUTINE (AUTOMATED) X-RAY CHEST P.A. VIEW WITH DIGITAL RADIOGRAPHY			
KL25-6412	ICU PROFILE - II	20280	20280	20280
	ABG, ARTERIAL BLOOD GAS BLOOD GROUPING & RH TYPING BLOOD SUGAR RANDOM (SUGAR R) C-REACTIVE PROTEIN (CRP - QUANTITATIVE) COMPLETE BLOOD COUNT (C.B.C) CULTURE, BLOOD (RAPID) CULTURE, URINE (RAPID) ECG (RESTING) HEPATITIS B SURFACE ANTIGEN, HBsAg - RAPID HIV (AIDS) ANTIBODY I & II (HIV) - RAPID KIDNEY FUNCTION TEST(KFT) LACTATE LIVER FUNCTION TEST CT SCAN ANGIO BRAIN WITH CONTRAST PROTHROMBIN TIME (PT+INR) PT+PTI+INR URINE ROUTINE (AUTOMATED) X-RAY CHEST P.A. VIEW WITH DIGITAL RADIOGRAPHY HEPATITIS C ANTIBODY, HCV ANTIBODY - RAPID			
KL25-6413	INFERTILITY PROFILE - I	3970	3970	3970
	FSH (FOLLICLE STIMULATING HORMONE) LUTEINIZING HORMONE (LH) PROLACTIN TSH (THYROID STIMULATING HORMONE) ULTRASENSITIVE TESTOSTERONE (TOTAL)			

LAB MEDICINE

Test Code	Test Name	OPD/Economy	IPD Charges Semi Pvt	Pvt
KL25-6414	INFERTILITY PROFILE - II	6960	6960	6960
	FSH (FOLLICLE STIMULATING HORMONE) SERUM ESTRADIOL LEVEL (ESTRADIOL) (E2) LUTEINIZING HORMONE (LH) PROLACTIN TESTOSTERONE (TOTAL) TSH (THYROID STIMULATING HORMONE) ULTRASENSITIVE ANTI MULLARIAN HARMONE (AMH)			
KL25-6415	IRON PROFILE	2350	2350	2350
	FERRITIN IRON + TIBC (IRON/TIBC) TRANSFERRIN SATURATION(T-SAT)			
KL25-6416	OSTEOPOROSIS SCREENING	5280	5280	5280
	CALCIUM (TOTAL) ESTRADIOL (T) (E2) PARATHYROID HORMONE (PARATHYROID) PTH INTACT PHOSPHOROUS VITAMIN D3 (25 HYDROXY)			
KL25-6417	PAC PROFILE	9320	10970	13180
	BLOOD GROUPING & RH TYPING BLOOD SUGAR RANDOM (SUGAR R) COMPLETE BLOOD COUNT (C.B.C) ECG (RESTING) KIDNEY FUNCTION TEST(KFT) LIVER FUNCTION TEST PROTHROMBIN TIME (PT+INR) PT+PTI+INR TRIPLE H (HBsAg Rapid, HCV Rapid & HIV I & II Rapid) X-RAY CHEST P.A. VIEW WITH DIGITAL RADIOGRAPHY			
KL25-6418	PCOD (POLYCYSTIC OVARIAN DISEASE),PANEL	5560	6540	7850
	BLOOD SUGAR (FASTING) FSH (FOLLICLE STIMULATING HORMONE) INSULIN FASTING LUTEINIZING HORMONE (LH) PROLACTIN TESTOSTERONE (TOTAL) TSH (THYROID STIMULATING HORMONE) ULTRASENSITIVE			
KL25-6419	PRE-OPERATIVE CATARACT SURGERY	3100	3100	3100
	BLOOD SUGAR (FASTING) BLOOD SUGAR RANDOM (SUGAR R) COMPLETE BLOOD COUNT (C.B.C) HEPATITIS B SURFACE ANTIGEN, HBsAg - RAPID HIV (AIDS) ANTIBODY I & II (HIV) - RAPID URINE ROUTINE (AUTOMATED) HEPATITIS C ANTIBODY, HCV ANTIBODY - RAPID			
KL25-6420	PT & APTT PROFILE	1210	1210	1210
	PROTHROMBIN TIME (PT+INR) PT+PTI+INR PTTK (APTT) TIME TEST/CONTROL			
KL25-6421	RICKETS PANEL	4560	4560	4560
	ALKALINE PHOSPHATE CALCIUM (TOTAL) PARATHYROID HORMONE (PARATHYROID) PTH INTACT PHOSPHOROUS VITAMIN D3 (25 HYDROXY)			
KL25-6422	THALESSAEMIA PROFILE	3260	3260	3260
	IRON + TIBC (IRON/TIBC) COMPLETE BLOOD COUNT (C.B.C) ELECTROPHORESIS, HB / HPLC PERIPHERAL SMEAR (P.S.) RETICULOCYTE COUNT			
KL25-6423	COVID-19	700	700	700
KL25-6424	COVID-19(HOME COLLECTION)	900	1060	1270

RADIODIAGNOSIS & IMAGING

MRI

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0001	ADDITIONAL FILM FOR MRI/ CT (PER FILM)	310	420	520
KR25-0002	ANAESTHESIA CHARGES FOR MRI	1930	1930	1930
KR25-0003	MRA ABDOMEN FOR AORTA PLAIN	10580	12450	14920
KR25-0004	MRA ABDOMEN FOR AORTA WITH CONTRAST	19750	23220	27890
KR25-0005	MRA ABDOMEN VESSELS WITH CONTRAST	12170	14300	17180
KR25-0006	MRI ADDITIONAL CONTRAST APPLICATION	4160	4680	5200
KR25-0007	MRI ANGIO SINGLE PART	19750	23220	27890
KR25-0008	MRI ANGIO WITH CONTRAST (SINGLE PART)	17940	21110	25330
KR25-0009	MRI ANGIOGRAPHY BRAIN	10580	12450	14920
KR25-0010	MRI ANGIOGRAPHY BRAIN WITH CONTRAST	16020	18830	22620
KR25-0011	MRI ANGIOGRAPHY LOWER ABDOMEN / PELVIS	12070	14210	17030
KR25-0012	MRI ANGIOGRAPHY LOWER ABDOMEN / PELVIS (Double Dose Contrast)	22350	26310	31570
KR25-0013	MRI ANGIOGRAPHY NECK VESSELS	10580	12450	14920
KR25-0014	MRI ANGIOGRAPHY NECK VESSELS WITH CONTRAST	16020	18830	22620
KR25-0015	MRI ANGIOGRAPHY ONE PART WITH DOUBLE DOSE CONTRAST	22350	26310	31570
KR25-0016	MRI ANGIOGRAPHY PERIPHERAL WITH CONTRAST	19750	23220	27890
KR25-0017	MRI ANGIOGRAPHY PERIPHERAL WITHOUT CONTRAST (Single Part)	12070	14210	17030
KR25-0018	MRI ANGIOGRAPHY UPPER ABDOMEN	12070	14210	17030
KR25-0019	MRI ANGIOGRAPHY UPPER ABDOMEN (Double Dose Contrast)	22350	26290	31550
KR25-0020	MRI ANGIOGRAPHY UPPER THORAX	12070	14210	17030
KR25-0021	MRI ANGIOGRAPHY UPPER THORAX (Double Dose Contrast)	22350	26290	31550
KR25-0022	MRI ANY SINGLE PART (EXTREMITIES)	10580	12450	14920
KR25-0023	MRI ANY SINGLE PART (EXTREMITIES) WITH CONTRAST	16020	18830	22620
KR25-0024	MRI ARTHROGRAM	16020	18830	22620
KR25-0025	MRI BILATERAL BREAST PLAIN	11740	13800	20610
KR25-0026	MRI BILATERAL BREAST WITH CONTRAST	17940	21110	25330
KR25-0027	MRI BOTH BRACHIAL PLEXUS	17940	21110	25330
KR25-0028	MRI BOTH BREAST PLAIN	16480	19410	23250
KR25-0029	MRI BOTH BREAST WITH CONTRAST	22350	26290	31550
KR25-0030	MRI BOTH HIP JOINTS	10580	12450	14920
KR25-0031	MRI BOTH HIP JOINTS WITH CONTRAST	16020	18830	22620
KR25-0032	MRI BOTH IAC	10580	12450	14920
KR25-0033	MRI BOTH IAC WITH CONTRAST	15010	17660	21180
KR25-0034	MRI BOTH KNEE JOINT WITH CONTRAST	28300	33290	39950
KR25-0035	MRI BOTH KNEE JOINT WITHOUT CONTRAST	18690	21990	26390
KR25-0036	MRI BOTH LOWER LIMBS ANGIO WITH CONTRAST	21350	25130	30060
KR25-0037	MRI BOTH LOWER LIMBS ANGIO WITH DOUBLE DOSE CONTRAST	26470	31140	37370
KR25-0038	MRI BOTH S.I. JOINTS	10580	12450	14920
KR25-0039	MRI BOTH S.I. JOINTS WITH CONTRAST	15230	17910	21490
KR25-0040	MRI BOTH TM JOINT	17940	21110	25330
KR25-0041	MRI BOTH UPPER LIMBS ANGIO WITH CONTRAST	17940	21110	25330

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0042	MRI BOTH UPPER LIMBS ANGIO WITH DOUBLE DOSE CONTRAST	26470	31140	37370
KR25-0043	MRI BOTH UPPER LIMBS ANGIO WITHOUT CONTRAST	15010	17660	21180
KR25-0044	MRI BRAIN + CONTRAST + SPECTROSCOPY	17010	20020	24010
KR25-0045	MRI BRAIN + CSF FLOW STUDY	14610	17180	20610
KR25-0046	MRI BRAIN + FUNCTIONAL STUDY (One Activity)	17170	20200	24240
KR25-0047	MRI BRAIN + FUNCTIONAL STUDY (Two Activity)	28610	33660	40390
KR25-0048	MRI BRAIN + PERFUSION (Contrast Study)	21760	25590	30710
KR25-0049	MRI BRAIN + SPECTROSCOPY	14610	17180	20610
KR25-0050	MRI BRAIN + STROKE PROTOCOL	11740	13800	16570
KR25-0051	MRI BRAIN AND ORBIT	12520	14730	17680
KR25-0052	MRI BRAIN AND ORBIT WITH CONTRAST	17020	20020	24030
KR25-0053	MRI BRAIN CSF FLOW STUDIES	10300	12110	14520
KR25-0054	MRI BRAIN CSF FLOW STUDIES WITH CONTRAST	15570	18320	21990
KR25-0055	MRI BRAIN SCREENING WITH DIFFUSION WI	4370	5130	6160
KR25-0056	MRI BRAIN WITH C P ANGLE WITH CONTRAST	15570	18320	21990
KR25-0057	MRI BRAIN WITH CONTRAST & DIFFUSION STUDY	15570	18320	21990
KR25-0058	MRI BRAIN WITH CONTRAST & MRA	17940	21110	25330
KR25-0059	MRI BRAIN WITH CP ANGLE	11460	13490	16180
KR25-0060	MRI BRAIN WITH DIFFUSION STUDY	10300	12110	14520
KR25-0061	MRI BRAIN WITH EPILEPSY / SEIZUE PROTOCOL WITH CONTRAST	16020	18830	22620
KR25-0062	MRI BRAIN WITH INNER EAR	15260	17950	21540
KR25-0063	MRI BRAIN WITH MRA	17010	20020	24010
KR25-0064	MRI BRAIN WITH PARKINSON	11740	13810	16570
KR25-0065	MRI BRAIN WITH PARKINSON WITH CONTRAST	16020	18850	22620
KR25-0066	MRI BRAIN.	9770	11500	13790
KR25-0067	MRI BRAIN. WITH CONTRAST	15570	18320	21990
KR25-0068	MRI BRAIN+CRANIAL NERVES	11740	13800	16570
KR25-0069	MRI BRAIN+SEIZUE PROTOCOL / EPILEPSY PROTOCOL	11740	13800	16570
KR25-0070	MRI BRAIN+VERTIGO PROTOCOL	11740	13800	16570
KR25-0071	MRI C.V. JUNCTION	10580	12450	14920
KR25-0072	MRI C.V. JUNCTION WITH CONTRAST	16020	18830	22620
KR25-0073	MRI CARDIAC (Plain)	15010	17660	21180
KR25-0074	MRI CARDIAC + CONTRAST	22350	26310	31570
KR25-0075	MRI CERVICAL & DORSAL SPINE (2 STUDIES)	17010	20020	24010
KR25-0076	MRI CERVICAL & DORSAL SPINE WITH CONTRAST	21350	25130	30140
KR25-0077	MRI CERVICAL & L.S. SPINE (2 STUDIES)	17010	20020	24010
KR25-0078	MRI CERVICAL & L.S. SPINE WITH CONTRAST	21350	25130	30140
KR25-0079	MRI CERVICAL SPINE	10300	12110	14520
KR25-0080	MRI CERVICAL SPINE WITH CONTRAST	15570	18320	21990
KR25-0081	MRI CERVICO DORSAL SPINE (ONE STUDY)	10300	12110	14520
KR25-0082	MRI CERVICO DORSAL SPINE WITH CONTRAST (ONE STUDY)	15570	18320	21990
KR25-0083	MRI CHEST	10580	12450	14920
KR25-0084	MRI CHEST WITH CONTRAST	16020	18830	22620

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0085	MRI CHOLANGIO PANCREATOGRAPHY (MRCP)	10580	12450	14920
KR25-0086	MRI CHOLANGIO PANCREATOGRAPHY (MRCP) WITH CONTRAST	16020	18830	22620
KR25-0087	MRI CISTERNOGRAPHY (Plain)	15010	17660	21180
KR25-0088	MRI COCCYX	10300	12110	14520
KR25-0089	MRI COCCYX WITH CONTRAST	15570	18320	21990
KR25-0090	MRI DIFFUSION OF ABDOMEN	5920	6960	8340
KR25-0091	MRI DIFFUSION OF SPINE	5920	6960	8340
KR25-0092	MRI DIFFUSION ONE PART	5920	6960	8340
KR25-0093	MRI DORSAL & L.S. SPINE (2 STUDIES)	17010	20020	24010
KR25-0094	MRI DORSAL & L.S. SPINE WITH CONTRAST	21350	25130	30140
KR25-0095	MRI DORSAL SPINE	10300	12110	14520
KR25-0096	MRI DORSAL SPINE WITH CONTRAST	15570	18320	21990
KR25-0097	MRI DORSO LUMBAR SPINE (ONE STUDY)	10300	12110	14520
KR25-0098	MRI DORSO LUMBAR SPINE WITH CONTRAST (ONE STUDY)	15570	18320	21990
KR25-0099	MRI DYNAMIC STUDY CONTRAST (For Liver & Pancreas)	17940	21110	25330
KR25-0100	MRI EMERGENCY CHARGES	1550	1820	2190
KR25-0101	MRI ENTEROCLYSIS	23550	27680	33220
KR25-0102	MRI ENTEROGRAPHY	17940	21110	25330
KR25-0103	MRI FACE	10580	12450	14920
KR25-0104	MRI FACE / NECK	10580	12450	14920
KR25-0105	MRI FACE / NECK WITH CONTRAST	16020	18830	22620
KR25-0106	MRI FETAL	10580	12450	14930
KR25-0107	MRI FINGURE (ANY ONE)	10580	12450	14940
KR25-0108	MRI FINGURE (ANY ONE) WITH CONTRAST	16020	18850	22620
KR25-0109	MRI FISTULOGRAM / PERINIUM	10580	12450	14920
KR25-0110	MRI L S SPINE+S I JOINT SCREENING	12070	14210	17030
KR25-0111	MRI LEFT ANKLE JOINT	10580	12450	14920
KR25-0112	MRI LEFT ANKLE JOINT WITH CONTRAST	16020	18830	22620
KR25-0113	MRI LEFT ARM	10580	12450	14920
KR25-0114	MRI LEFT ARM WITH CONTRAST	16020	18830	22620
KR25-0115	MRI LEFT BRACHIAL PLEXUS	10580	12450	14920
KR25-0116	MRI LEFT BRACHIAL PLEXUS WITH CONTRAST	16020	18830	22620
KR25-0117	MRI LEFT ELBOW JOINT	10580	12450	14920
KR25-0118	MRI LEFT ELBOW JOINT WITH CONTRAST	16020	18830	22620
KR25-0119	MRI LEFT FOOT	10580	12450	14920
KR25-0120	MRI LEFT FOOT WITH CONTRAST	16020	18830	22620
KR25-0121	MRI LEFT FORE ARM/LOWER ARM	10580	12450	14920
KR25-0122	MRI LEFT FORE ARM/LOWER ARM WITH CONTRAST	16020	18830	22620
KR25-0123	MRI LEFT HAND	10580	12450	14920
KR25-0124	MRI LEFT HAND WITH CONTRAST	16020	18830	22620
KR25-0125	MRI LEFT HEEL	10580	12450	14920
KR25-0126	MRI LEFT HEEL WITH CONTRAST	16020	18830	22620
KR25-0127	MRI LEFT HIP JOINT	10580	12450	14920

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0128	MRI LEFT HIP JOINT WITH CONTRAT	16020	18830	22620
KR25-0129	MRI LEFT IAC (Internal Auditory Canal)	10580	12450	14920
KR25-0130	MRI LEFT KNEE + CARTILAGE IMAGING	12070	14210	17030
KR25-0131	MRI LEFT KNEE JOINT	10580	12450	14920
KR25-0132	MRI LEFT KNEE JOINT WITH CONTRAST	16020	18830	22620
KR25-0133	MRI LEFT LEG	10580	12450	14920
KR25-0134	MRI LEFT LEG WITH CONTRAST	16020	18830	22620
KR25-0135	MRI LEFT ORBIT	10580	12450	14920
KR25-0136	MRI LEFT SHOULDER JOINT	10580	12450	14920
KR25-0137	MRI LEFT SHOULDER JOINT WITH CONTRAST	16020	18830	22620
KR25-0138	MRI LEFT THIGH	10580	12450	14920
KR25-0139	MRI LEFT THIGH WITH CONTRAST	16020	18830	22620
KR25-0140	MRI LEFT THUMB	10580	12450	14920
KR25-0141	MRI LEFT THUMB WITH CONTRAST	16020	18830	22620
KR25-0142	MRI LEFT TMJ (Temporo-Mandibular Joint)	10580	12450	14920
KR25-0143	MRI LEFT TOE	10580	12450	14920
KR25-0144	MRI LEFT TOE WITH CONTRAST	16020	18830	22620
KR25-0145	MRI LEFT UPPER ARM	10580	12450	14920
KR25-0146	MRI LEFT UPPER ARM WITH CONTRAST	16020	18830	22620
KR25-0147	MRI LEFT WRIST JOINT	10580	12450	14920
KR25-0148	MRI LEFT WRIST JOINT WITH CONTRAST	16020	18830	22620
KR25-0149	MRI LOWER ABDOMEN	10580	12450	14920
KR25-0150	MRI LOWER ABDOMEN WITH CONTRAST	16020	18830	22620
KR25-0151	MRI LOWER ABDOMEN WITH CONTRAST & MRI UROGRAPHY	21350	25130	30140
KR25-0152	MRI LOWER ABDOMEN WITH MRI UROGRAPHY	21350	25130	30140
KR25-0153	MRI LUMBO-SACRAL SPINE	10300	12110	14520
KR25-0154	MRI LUMBO-SACRAL SPINE WITH CONTRAST	15570	18320	21990
KR25-0155	MRI MUSCULO SKELTON SOFT TISSUE WITH CONTRAST	16020	18830	22620
KR25-0156	MRI NECK	10580	12450	14920
KR25-0157	MRI NON-CONTRAST ANGIO BRAIN + CONTRAST ANGIO	17940	21110	25330
KR25-0158	MRI ONLY CSF FLOW STUDY	5920	6960	8340
KR25-0159	MRI ORBIT	10580	12450	14920
KR25-0160	MRI ORBIT WITH CONTRAST	16020	18830	22620
KR25-0161	MRI PELVIS	10580	12450	14920
KR25-0162	MRI PELVIS WITH CONTRAST	16020	18830	22620
KR25-0163	MRI PENIS PLAIN	10170	11970	14360
KR25-0164	MRI PENIS WITH CONTRAST	15400	18120	21740
KR25-0165	MRI PILONIDAL SINUS	10580	12450	14920
KR25-0166	MRI PNS	10580	12450	14920
KR25-0167	MRI PNS WITH CONTRAST	16020	18830	22620
KR25-0168	MRI PNS/ ORBIT + SCREENING OF BRAIN WITH CONTRAST	16850	19820	23780
KR25-0169	MRI PROSTATE	10580	12450	14920
KR25-0170	MRI PROSTATE + CONTRAST + SPECTROSCOPY	19750	23220	27890

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0171	MRI RENAL ANGIOGRAPHY (Double Dose Contrast)	22350	26290	31550
KR25-0172	MRI RENAL ANGIOGRAPHY WITH CONTRAST	19750	23220	27890
KR25-0173	MRI RENAL ANGIOGRAPHY WITHOUT CONTRAST	12070	14210	17030
KR25-0174	MRI RIGHT ANKLE JOINT	10580	12450	14920
KR25-0175	MRI RIGHT ANKLE JOINT WITH CONTRAT	16020	18830	22620
KR25-0176	MRI RIGHT ARM	10580	12450	14920
KR25-0177	MRI RIGHT ARM WITH CONTRAST	16020	18830	22620
KR25-0178	MRI RIGHT BRACHIAL PLEXUS	10580	12450	14920
KR25-0179	MRI RIGHT BRACHIAL PLEXUS WITH CONTRAST	16020	18830	22620
KR25-0180	MRI RIGHT ELBOW JOINT	10580	12450	14920
KR25-0181	MRI RIGHT ELBOW JOINT WITH CONTRAST	16020	18830	22620
KR25-0182	MRI RIGHT FOOT	10580	12450	14920
KR25-0183	MRI RIGHT FOOT WITH CONTRAST	16020	18830	22620
KR25-0184	MRI RIGHT FORE ARM/LOWER ARM	10580	12450	14920
KR25-0185	MRI RIGHT FORE ARM/LOWER ARM WITH CONTRAST	16020	18830	22620
KR25-0186	MRI RIGHT HAND	10580	12450	14920
KR25-0187	MRI RIGHT HAND WITH CONTRAST	16020	18830	22620
KR25-0188	MRI RIGHT HEEL	10580	12450	14920
KR25-0189	MRI RIGHT HEEL WITH CONTRAST	16020	18830	22620
KR25-0190	MRI RIGHT HIP JOINT	10580	12450	14920
KR25-0191	MRI RIGHT HIP JOINT WITH CONTRAT	16020	18830	22620
KR25-0192	MRI RIGHT IAC	10580	12450	14920
KR25-0193	MRI RIGHT KNEE + CARTILAGE IMAGING	12070	14210	17030
KR25-0194	MRI RIGHT KNEE JOINT	10580	12450	14920
KR25-0195	MRI RIGHT KNEE JOINT WITH CONTRAST	16020	18830	22620
KR25-0196	MRI RIGHT LEG	10580	12450	14920
KR25-0197	MRI RIGHT LEG WITH CONTRAST	16020	18830	22620
KR25-0198	MRI RIGHT ORBIT	10580	12450	14920
KR25-0199	MRI RIGHT SHOULDER JOINT	10580	12450	14920
KR25-0200	MRI RIGHT SHOULDER JOINT WITH CONTRAST	16020	18830	22620
KR25-0201	MRI RIGHT THIGH	10580	12450	14920
KR25-0202	MRI RIGHT THIGH WITH CONTRAT	16020	18830	22620
KR25-0203	MRI RIGHT THUMB	10580	12450	14920
KR25-0204	MRI RIGHT THUMB WITH CONTRAST	16020	18830	22620
KR25-0205	MRI RIGHT TMJ (Temporo-Mandibular Joint)	10580	12450	14920
KR25-0206	MRI RIGHT TOE	10580	12450	14920
KR25-0207	MRI RIGHT TOE WITH CONTRAST	16020	18830	22620
KR25-0208	MRI RIGHT UPPER ARM	10580	12450	14920
KR25-0209	MRI RIGHT UPPER ARM WITH CONTRAST	16020	18830	22620
KR25-0210	MRI RIGHT WRIST JOINT	10580	12450	14920
KR25-0211	MRI RIGHT WRIST JOINT WITH CONTRAT	16020	18830	22620
KR25-0212	MRI S.I. JOINTS	10580	12450	14920
KR25-0213	MRI SACRO-COCCYX	10300	12120	14540

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0214	MRI SACRO-COCCYX WITH CONTRAST	16020	18850	22620
KR25-0215	MRI SCREENING (Three Part)	8840	10400	12400
KR25-0216	MRI SCREENING (Two Part)	6630	7800	9300
KR25-0217	MRI SCREENING ONLY (ANY ONE PART)	4420	5200	6200
KR25-0218	MRI SCREENING WITH CONTRAST (One Part)	7090	8330	10010
KR25-0219	MRI SCREENING WITH CONTRAST (Three Part)	16020	18830	22620
KR25-0220	MRI SCREENING WITH CONTRAST (Two Part)	10580	12450	14920
KR25-0221	MRI SCROTUM	10580	12450	14920
KR25-0222	MRI SCROTUM WITH CONTRAST	16020	18830	22620
KR25-0223	MRI SELLA	10580	12450	14920
KR25-0224	MRI SELLA WITH CONTRAST	15370	18090	21700
KR25-0225	MRI SI JOINT SCREENING US NECK ANGIO WITH 20 ML CONTRAST	16550	19460	23360
KR25-0226	MRI SINGLE BREAST PLAIN	10570	12450	14920
KR25-0227	MRI SINGLE BREAST WITH CONTRAST	16020	18850	22620
KR25-0228	MRI SINGLE LIMB ANGIO WITH CONTRAST	17010	20020	24010
KR25-0229	MRI SINGLE LIMB ANGIO WITH DOUBLE DOSE CONTRAST	22060	25950	31140
KR25-0230	MRI SINGLE LIMB ANGIOGRAPHY WITHOUT CONTRAST	12070	14210	17030
KR25-0231	MRI SINOGRAM	10080	11860	14230
KR25-0232	MRI SPECTROSCOPY (Additional with One Complete Study)	4410	5200	6220
KR25-0233	MRI SPECTROSCOPY BRAIN	10300	12120	14540
KR25-0234	MRI STERNO-CLAVICULAR REGION	10580	12450	14920
KR25-0235	MRI TACTOGRAPHY + BRAIN SCAN	15010	17660	21180
KR25-0236	MRI TEMPORAL BONE	10580	12450	14920
KR25-0237	MRI TEMPORAL BONE WITH CONTRAST	16020	18830	22620
KR25-0238	MRI THORAX WITH CONTRAST	16020	18830	22620
KR25-0239	MRI TM JOINT	10580	12450	14920
KR25-0240	MRI TM JOINT WITH CONTRAST	16020	18830	22620
KR25-0241	MRI TRACTOGRAPHY	5920	6960	8340
KR25-0242	MRI UPPER ABDOMEN	10580	12450	14920
KR25-0243	MRI UPPER ABDOMEN WITH CONTRAST	16020	18830	22620
KR25-0244	MRI UPPER ABDOMEN WITH M.R.C.P.	21350	25130	30140
KR25-0245	MRI UPPER ABDOMEN WITH M.R.C.P. WITH CONTRAST	26740	31450	37750
KR25-0246	MRI UROGRAPHY	10580	12450	14920
KR25-0247	MRI UROGRAPHY WITH CONTRAST	16020	18830	22620
KR25-0248	MRI VENOGRAPHY	10580	12450	14920
KR25-0249	MRI VENOGRAPHY BOTH FOREARM	15010	17660	21180
KR25-0250	MRI VENOGRAPHY BOTH FOREARM (Double Dose Contrast)	26470	31140	37370
KR25-0251	MRI VENOGRAPHY BOTH FOREARM WITH CONTRAST	19750	23220	27890
KR25-0252	MRI VENOGRAPHY BOTH LOWER LEGS	15010	17660	21180
KR25-0253	MRI VENOGRAPHY BOTH LOWER LEGS (Double Dose Contrast)	26780	31510	37810
KR25-0254	MRI VENOGRAPHY BOTH LOWER LEGS WITH CONTRAST	19750	23220	27890
KR25-0255	MRI VENOGRAPHY BOTH THIGHS	15010	17660	21180
KR25-0256	MRI VENOGRAPHY BOTH THIGHS (Double Dose Contrast)	26470	31140	37370

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0257	MRI VENOGRAPHY BOTH THIGHS WITH CONTRAST	19750	23220	27890
KR25-0258	MRI VENOGRAPHY BOTH UPPER ARM	15010	17660	21180
KR25-0259	MRI VENOGRAPHY BOTH UPPER ARM (Double Dose Contrast)	26470	31140	37370
KR25-0260	MRI VENOGRAPHY BOTH UPPER ARM WITH CONTRAST	19750	23220	27890
KR25-0261	MRI VENOGRAPHY LOWER ABDOMEN / PELVIS	12070	14210	17030
KR25-0262	MRI VENOGRAPHY LOWER ABDOMEN / PELVIS (Double Dose Contrast)	22350	26290	31550
KR25-0263	MRI VENOGRAPHY LOWER ABDOMEN / PELVIS WITH CONTRAST	19750	23220	27890
KR25-0264	MRI VENOGRAPHY LOWER THORAX	15010	17660	21180
KR25-0265	MRI VENOGRAPHY LOWER THORAX (Double Dose Contrast)	22350	26290	31550
KR25-0266	MRI VENOGRAPHY LOWER THORAX WITH CONTRAST	19750	23220	27890
KR25-0267	MRI VENOGRAPHY UPPER ABDOMEN	12070	14210	17030
KR25-0268	MRI VENOGRAPHY UPPER ABDOMEN (Double Dose Contrast)	22350	26290	31550
KR25-0269	MRI VENOGRAPHY UPPER ABDOMEN WITH CONTRAST	19750	23220	27890
KR25-0270	MRI VENOGRAPHY UPPER THORAX	12070	14210	17030
KR25-0271	MRI VENOGRAPHY UPPER THORAX (Double Dose Contrast)	22350	26290	31550
KR25-0272	MRI VENOGRAPHY UPPER THORAX WITH CONTRAST	19750	23220	27890
KR25-0273	MRI VENOGRAPHY WITH CONTRAST	16020	18830	22620
KR25-0274	MRI WHOLE ABDOMEN WITH CONTRAST	21350	25130	30150
KR25-0275	MRI WHOLE ABDOMEN WITHOUT CONTRAST	19750	23220	27890
KR25-0276	MRI WHOLE BODY DIFFUSION STUDY (DWIFS)	5920	6960	8340
KR25-0277	MRI WHOLE SPINE WITHOUT CONTRAST	30890	41540	43610
KR25-0278	REVIEW CHARGES FOR MRI (DONE FROM OUTSIDE)	1260	1260	1260

Note : Emergency MRI Starts 08:00 PM on Sunday/ Holiday

C.T. SCAN

KR25-0279	CBCT - 1 QUADRANT	4000	4710	5650
KR25-0280	CBCT - BOTH JAW	5600	6590	7910
KR25-0281	CBCT - BOTH TM JOINT	6500	7650	9180
KR25-0282	CBCT - FACE	4800	5650	6780
KR25-0283	CBCT - SINGLE JAW	4500	5290	6350
KR25-0284	CBCT - SINGLE TM JOINT	5500	6470	7770
KR25-0285	CBCT - SINGLE TOOTH	2500	2940	3530
KR25-0286	CBCT -2 TEETH	3500	4120	4940
KR25-0287	CECT UPPER LIMB ANGIOGRAPHY	18600	21880	26250
KR25-0288	CONTRAST VISIPAQUE CHARGES	4220	4220	4220
KR25-0289	CT CHEST WITH WHOLE ABDOMEN FOR PAEDIATRIC	15450	18150	21800
KR25-0290	CT PELVIS WITH BOTH HIPS	7160	8410	10110
KR25-0291	CT SCAN 3D EVALUATION WITH VR IMAGES	3850	4550	5450
KR25-0292	CT SCAN 3D IMAGE RENDERING WITH POST CONTRAST IMPLANT OF LIMBS	10470	12330	14780
KR25-0293	CT SCAN ABDOMEN/THORAX WITH CONTRAST (CHILD)	12210	14370	17260
KR25-0294	CT SCAN ABDOMINAL ANGIOGRAPHY WITH CONTRAST	18600	21880	26250
KR25-0295	CT SCAN ANGIO (LOCALISED) WITH CONTRAST	18600	21880	26250

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0296	CT SCAN ANGIO ABD AORTA WITH CONTRAST	18600	21880	26250
KR25-0297	CT SCAN ANGIO ANY PART WITH VISIPAQUE CONTRAST	20700	24350	29220
KR25-0298	CT SCAN ANGIO BRAIN + VENOGRAM WITH CONTRAST	21820	25360	30120
KR25-0299	CT SCAN ANGIO CAROTID ARTERY WITH CONTRAST	18600	21880	26250
KR25-0300	CT SCAN ANGIO CEREBRAL WITH CONTRAST	18600	21880	26250
KR25-0301	CT SCAN ANGIO NECK VESSEL WITH CONTRAST	17710	20840	25010
KR25-0302	CT SCAN ANGIO PERIPHERAL / EXTREMETIES WITH CONTRAST	18600	21880	26250
KR25-0303	CT SCAN ANGIO PERIPHERAL EXTREMETIES WITH VISIPAQUE CONTRAST	20700	24350	29220
KR25-0304	CT SCAN ANGIO PULMONARY WITH VISIPAQUE CONTRAST	20700	24350	29220
KR25-0305	CT SCAN ANGIO RENAL ARTERY WITH CONTRAST	18600	21880	26250
KR25-0306	CT SCAN ANGIO TRIPLE RULE OUT HEART / PULMONARY/ AORTA	20170	23740	28490
KR25-0307	CT SCAN ANGIOGRAPHY - CORONARY +PULMONARY	20170	23540	28490
KR25-0308	CT SCAN ANGIOGRAPHY BOTH UPPER LIMB	17200	20230	24280
KR25-0309	CT SCAN ANGIOGRAPHY CORONARY + RENAL	20170	23740	28490
KR25-0310	CT SCAN ANGIOGRAPHY PULMONARY WITH CONTRAST	18600	21880	26250
KR25-0311	CT SCAN ANGIOGRAPHY SPINE	20170	23740	28490
KR25-0312	CT SCAN ANGIOGRAPHY THORAX	17200	20230	24280
KR25-0313	CT SCAN ANGIOGRAPHY VOLUMETRY	23140	27230	32680
KR25-0314	CT SCAN AORTIC ANGIOGRAPHY WITH CONTRAST	18600	21880	26250
KR25-0315	CT SCAN BOTH FEET	7160	8410	10110
KR25-0316	CT SCAN BOTH FEET WITH CONTRAST	9630	11340	13620
KR25-0317	CT SCAN BOTH HIP JOINTS	7160	8410	10110
KR25-0318	CT SCAN BRAIN ANGIOGRAPHY WITH CONTRAST	15450	18150	21800
KR25-0319	CT SCAN BRAIN PERFUSION STUDY WITH CONTRAST	15540	18290	21930
KR25-0320	CT SCAN CALCIUM SCORING PLAIN	10060	11820	14160
KR25-0321	CT SCAN CARDIAC / CORONARY ANGIOGRAPHY (ADULT)	17200	20230	24280
KR25-0322	CT SCAN CARDIAC ANGIOGRAPHY WITH CONTRAST (PAEDIATRIC)	20830	24520	29410
KR25-0323	CT SCAN CARDIAC/ CORONARY ANGIOGRAPHY WITH VISIPAQUE CONTRAST	18760	22070	26490
KR25-0324	CT SCAN CAROTID ANGIO + BRAIN ANGIO WITH CONTRAST	22400	26330	31600
KR25-0325	CT SCAN CAROTID ANGIOGRAPHY WITH CONTRAST	18600	21880	26250
KR25-0326	CT SCAN CERVICAL SPINE UP TO FOUR LEVEL	6920	8140	9760
KR25-0327	CT SCAN CERVICAL SPINE UPTO FOUR LEVEL WITH CONTRAST	9630	11340	13620
KR25-0328	CT SCAN CHEST & WHOLE ABDOMEN WITH CONTRAST	20220	23790	28550
KR25-0329	CT SCAN CHEST (HRCT)	6390	7510	9020
KR25-0330	CT SCAN CHEST (NCCT)	6390	7510	9020
KR25-0331	CT SCAN CHEST WITH CONTRAST	9070	10670	12820
KR25-0332	CT SCAN COLONOGRAM	12600	14830	17790
KR25-0333	CT SCAN CONTRAST (ORAL & IV)	3010	3530	4230
KR25-0334	CT SCAN CONTRAST (ORAL)	660	770	920
KR25-0335	CT SCAN CONTRAST CENTRAL VENOGRAPHY	18600	21880	26260
KR25-0336	CT SCAN CORONARY ANGIOGRAPHY WITH CALCIUM SCORING	17200	20230	24280
KR25-0337	CT SCAN CORONARY ANGIOGRAPHY WITH CONTRAST (POST CABG)	21620	25430	30520
KR25-0338	CT SCAN CORONARY CALCIUM SCORING	5840	6880	8240

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0339	CT SCAN CYSTOGRAM	7160	8410	10110
KR25-0340	CT SCAN DENTA SCAN	7710	9070	10890
KR25-0341	CT SCAN DENTAL PLANNING	7160	8410	10110
KR25-0342	CT SCAN DISTAL COLOGRAM WITH RECTAL CONTRAST	6820	8030	9640
KR25-0343	CT SCAN DORSAL SPINE	6920	8140	9760
KR25-0344	CT SCAN DORSAL SPINE WITH CONTRAST	9630	11340	13620
KR25-0345	CT SCAN DORSO-LUMBAR SPINE	6920	8140	9760
KR25-0346	CT SCAN DYNAMIC BILATERAL TM JOINT OPEN/ CLOSE MOUTH	3310	3900	7780
KR25-0347	CT SCAN EMERGENCY CHARGES	1470	1730	2070
KR25-0348	CT SCAN ENTEROCLYSIS	13770	16200	19440
KR25-0349	CT SCAN ENTEROGRAPHY	11250	13230	15880
KR25-0350	CT SCAN EXTREMETIES (PER PART)	7160	8410	10110
KR25-0351	CT SCAN EXTREMETIES (PER PART) WITH CONTRAST	9860	11610	13920
KR25-0352	CT SCAN FACE	7160	8410	10110
KR25-0353	CT SCAN FACE WITH CONTRAST	9860	11610	13920
KR25-0354	CT SCAN GUIDED CHEMOTHERAPY	6720	7910	9490
KR25-0355	CT SCAN HEAD CONTRAST FOR ADULT	5820	6860	8240
KR25-0356	CT SCAN HEAD CONTRAST FOR CHILD	4860	5720	6870
KR25-0357	CT SCAN HEAD NON-CONTRAST	3480	4090	4900
KR25-0358	CT SCAN HEAD PLAIN & CONTRAST	5820	6860	8240
KR25-0359	CT SCAN IV CONTRAST (100 ML)	2660	3130	3770
KR25-0360	CT SCAN KUB (NCCT KUB)	6390	7510	9020
KR25-0361	CT SCAN KUB + UROGRAPHY WITH CONTRAST	12360	14530	17440
KR25-0362	CT SCAN KUB WITH CONTRAST (FEMALE)	10810	12740	15270
KR25-0363	CT SCAN KUB WTIH CONTRAST (MALE)	10810	12740	15270
KR25-0364	CT SCAN LEFT ANKLE JOINT	7160	8410	10110
KR25-0365	CT SCAN LEFT ANKLE JOINT WITH CONTRAST	9860	11610	13920
KR25-0366	CT SCAN LEFT ARM	7160	8410	10110
KR25-0367	CT SCAN LEFT ARM WITH CONTRAST	9860	11610	13920
KR25-0368	CT SCAN LEFT ELBOW JOINT	7160	8410	10110
KR25-0369	CT SCAN LEFT ELBOW JOINT WITH CONTRAST	9860	11610	13920
KR25-0370	CT SCAN LEFT FOOT	7160	8410	10110
KR25-0371	CT SCAN LEFT FOREARM/LOWER ARM	7160	8410	10110
KR25-0372	CT SCAN LEFT FOREARM/LOWER ARM WITH CONTRAST	9860	11610	13920
KR25-0373	CT SCAN LEFT HAND	7160	8410	10110
KR25-0374	CT SCAN LEFT HAND WITH CONTRAST	9860	11610	13920
KR25-0375	CT SCAN LEFT HIP JOINT	7160	8410	10110
KR25-0376	CT SCAN LEFT HIP JOINT WITH CONTRAST	9860	11610	13920
KR25-0377	CT SCAN LEFT KNEE JOINT	7160	8410	10110
KR25-0378	CT SCAN LEFT KNEE JOINT WITH CONTRAST	9860	11610	13920
KR25-0379	CT SCAN LEFT LEG	7160	8410	10110
KR25-0380	CT SCAN LEFT LEG WITH CONTRAST	9860	11610	13920
KR25-0381	CT SCAN LEFT SHOULDER JOINT	7160	8410	10110

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0382	CT SCAN LEFT SHOULDER JOINT WITH CONTRAST	9860	11610	13920
KR25-0383	CT SCAN LEFT THIGH	7160	8410	10110
KR25-0384	CT SCAN LEFT THIGH WITH CONTRAST	9860	11610	13920
KR25-0385	CT SCAN LEFT WRIST JOINT	7160	8410	10110
KR25-0386	CT SCAN LEFT WRIST JOINT WITH CONTRAST	9860	11610	13920
KR25-0387	CT SCAN LIVER VOLUMETRIC STUDY WITH CONTRAST	18600	21880	26260
KR25-0388	CT SCAN LOWER ABDOMEN/PELVIS (FEMALE)	6270	7360	8840
KR25-0389	CT SCAN LOWER ABDOMEN/PELVIS (MALE)	6270	7360	8840
KR25-0390	CT SCAN LOWER ABDOMEN/PELVIS WITH CONTRAST (FEMALE)	9280	10930	13100
KR25-0391	CT SCAN LOWER ABDOMEN/PELVIS WITH CONTRAST (MALE)	9280	10930	13100
KR25-0392	CT SCAN LOWER JAW ARCH	2750	3240	3900
KR25-0393	CT SCAN LOWER LIMB ANGIOGRAPHY WITH CONTRAST	18600	21880	26250
KR25-0394	CT SCAN LOWER LIMB VENOGRAM WITH CONTRAST	20000	23530	28240
KR25-0395	CT SCAN LS SPINE	6920	8140	9760
KR25-0396	CT SCAN LS SPINE WITH CONTRAST	9630	11340	13620
KR25-0397	CT SCAN LS SPINE WITH SI JOINTS	8630	10150	12180
KR25-0398	CT SCAN LS SPINE WITH SI JOINTS WITH CONTRAST	11300	13290	15960
KR25-0399	CT SCAN LUMBAR SPINE ADDITIONAL LEVEL	6920	8140	9760
KR25-0400	CT SCAN LUMBAR SPINE ADDITIONAL LEVEL WITH CONTRAST	9630	11340	13620
KR25-0401	CT SCAN MANDIBLE	7160	8410	10110
KR25-0402	CT SCAN MANDIBLE WITH CONTRAST	9750	11470	13770
KR25-0403	CT SCAN NASOPHARYNX	7160	8410	10110
KR25-0404	CT SCAN NASOPHARYNX WITH CONTRAST	9750	11470	13770
KR25-0405	CT SCAN NECK	6920	8140	9760
KR25-0406	CT SCAN NECK (4D)	7160	8430	10120
KR25-0407	CT SCAN NECK WITH CONTRAST	9960	11720	14070
KR25-0408	CT SCAN NECK WITH FACE	7160	8410	10110
KR25-0409	CT SCAN ORBIT AXIAL & CORONAL SECTION	6270	7360	8840
KR25-0410	CT SCAN ORBIT AXIAL & CORONAL SECTION WITH CONTRAST	8950	10520	12620
KR25-0411	CT SCAN ORBIT AXIAL SECTION	4150	4870	5860
KR25-0412	CT SCAN ORBIT AXIAL SECTION WITH CONTRAST	6820	8020	9620
KR25-0413	CT SCAN ORBIT CORONAL SECTION	4900	5760	6920
KR25-0414	CT SCAN ORBIT CORONAL SECTION WITH CONTRAST	7620	8970	10750
KR25-0415	CT SCAN PARANASAL SINUS AXIAL & CORONAL SECTION	6270	7360	8840
KR25-0416	CT SCAN PARANASAL SINUS AXIAL & CORONAL SECTION WITH CONTRAST	8950	10520	12620
KR25-0417	CT SCAN PARANASAL SINUS AXIAL SECTION	4150	4870	5860
KR25-0418	CT SCAN PARANASAL SINUS AXIAL SECTION WITH CONTRAST	6820	8020	9620
KR25-0419	CT SCAN PARANASAL SINUS CORONAL SECTION	4900	5760	6920
KR25-0420	CT SCAN PARANASAL SINUS CORONAL SECTION WITH CONTRAST	7620	8970	10750
KR25-0421	CT SCAN PARATHYROID EVALUATION 4D WITH CONTRAST	13830	16260	19510
KR25-0422	CT SCAN PELVIS WITH B/L HIPS	5700	6710	8040
KR25-0423	CT SCAN PULMONARY ANGIOGRAPHY WITH CONTRAST AND BILATERAL LOWER LIMBS VENOGRAPH	21820	25660	30810
KR25-0424	CT SCAN RIGHT ANKLE JOINT	7160	8410	10110

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0425	CT SCAN RIGHT ANKLE JOINT WITH CONTRAST	9860	11610	13920
KR25-0426	CT SCAN RIGHT ARM	7160	8410	10110
KR25-0427	CT SCAN RIGHT ARM WITH CONTRAST	9860	11610	13920
KR25-0428	CT SCAN RIGHT ELBOW JOINT	7160	8410	10110
KR25-0429	CT SCAN RIGHT ELBOW JOINT WITH CONTRAST	9860	11610	13920
KR25-0430	CT SCAN RIGHT FOOT	7160	8410	10110
KR25-0431	CT SCAN RIGHT FOREARM/LOWER ARM	7160	8410	10110
KR25-0432	CT SCAN RIGHT FOREARM/LOWER ARM WITH CONRAST	9860	11610	13920
KR25-0433	CT SCAN RIGHT HAND	7160	8410	10110
KR25-0434	CT SCAN RIGHT HAND WITH CONTRAST	9860	11610	13920
KR25-0435	CT SCAN RIGHT HIP JOINT	7160	8410	10110
KR25-0436	CT SCAN RIGHT HIP JOINT WITH CONTRAST	9860	11610	13920
KR25-0437	CT SCAN RIGHT KNEE JOINT	7160	8410	10110
KR25-0438	CT SCAN RIGHT KNEE JOINT WITH CONTRAST	9860	11610	13920
KR25-0439	CT SCAN RIGHT LEG	7160	8410	10110
KR25-0440	CT SCAN RIGHT LEG WITH CONTRAST	9860	11610	13920
KR25-0441	CT SCAN RIGHT SHOULDER JOINT	7160	8410	10110
KR25-0442	CT SCAN RIGHT SHOULDER JOINT WITH CONTRAST	9860	11610	13920
KR25-0443	CT SCAN RIGHT THIGH	7160	8410	10110
KR25-0444	CT SCAN RIGHT THIGH WITH CONTRAST	9860	11610	13920
KR25-0445	CT SCAN RIGHT WRIST JOINT	7160	8410	10110
KR25-0446	CT SCAN RIGHT WRIST JOINT WITH CONTRAST	9860	11610	13920
KR25-0447	CT SCAN SCANOGRAM FOR LIMBS	1330	1570	1890
KR25-0448	CT SCAN SELLA	6270	7360	8840
KR25-0449	CT SCAN SELLA WITH CONTRAST	7160	8410	10110
KR25-0450	CT SCAN SINOGRAM	6300	7410	8890
KR25-0451	CT SCAN STERNO-CLAVICULAR JOINT	6820	8020	9640
KR25-0452	CT SCAN TEMPORAL BONE (HRCT)	7160	8410	10110
KR25-0453	CT SCAN THORAX	6390	7510	9020
KR25-0454	CT SCAN THORAX CONTRAST	9070	10670	12820
KR25-0455	CT SCAN TM JOINTS AXIAL & CORONAL	6270	7360	8840
KR25-0456	CT SCAN TM JOINTS AXIAL & CORONAL SECTION WITH CONTRAST	8950	10520	12620
KR25-0457	CT SCAN TRIPLE PHASE ABDOMEN	13770	16190	19420
KR25-0458	CT SCAN UPPER ABDOMEN PLAIN (NCCT)	6270	7360	8840
KR25-0459	CT SCAN UPPER ABDOMEN WITH CONTRAST	9280	10930	13100
KR25-0460	CT SCAN UPPER JAW ARCH	2750	3240	3900
KR25-0461	CT SCAN UPPER LIMB ANGIOGRAPHY WITH CONTRAST	18600	21880	26250
KR25-0462	CT SCAN UROGRAPHY	10810	12740	15270
KR25-0463	CT SCAN VENOGRAM WITH CONTRAST	15450	17730	21290
KR25-0464	CT SCAN VENOGRAPHY WITH HEAD + NECK	26460	31130	37350
KR25-0465	CT SCAN VENUGRAM BRAIN WITH CONTRAST	20000	23530	28240
KR25-0466	CT SCAN VIRTUAL BRONCHOSCOPY	9990	11750	14100
KR25-0467	CT SCAN WHOLE ABDOMEN PLAIN (FEMALE)	10760	12660	15200

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0468	CT SCAN WHOLE ABDOMEN PLAIN (MALE)	10760	12660	15200
KR25-0469	CT SCAN WHOLE ABDOMEN WITH CONTRAST - FEMALE	13770	16190	19420
KR25-0470	CT SCAN WHOLE ABDOMEN WITH CONTRAST - MALE	13770	16190	19420
KR25-0471	CT-VENOGRAPHY	18600	21880	26250
KR25-0472	EMERGENCY SCREENING CT OF ONE PART ONLY	3310	3900	4670
KR25-0473	HRCT TEMPORAL BONE WITH COCHLEA IMPLANT EVALUATION	11250	13230	15880
KR25-0474	NCCT CHEST + ABDOMEN TRAUMA PROTOCOL	7620	8970	10750
KR25-0475	NCCT HEAD WITH SCREENING OF CERVICAL SPINE	4790	5640	6750
KR25-0476	NCCT HEAD WITH SCREENING OF FACE	4790	5640	6760
KR25-0477	NCCT HEAD/CERVICAL SPINE SCREENING/FACE TRAUMA	6270	7360	8840
KR25-0478	NCCT PNS SCREENING POST - OP	3670	3670	3670
KR25-0479	PERIPHERAL ANGIO (UPPER/LOWER LIMB) WITH VISIPAQUE 2 VIAL	19140	22500	27010
KR25-0480	REVIEW CHARGES FOR CT SCAN (DONE FROM OUTSIDE)	1020	1190	1430

Note : Emergency CT Scan Starts 08:00 PM on Sunday/ Holiday

ULTRASOUND

KR25-0481	ADDITIONAL FILM FOR ULTRASOUND	270	270	270
KR25-0482	ULTRASOUND ANKLE BOTH	2940	3450	4150
KR25-0483	ULTRASOUND ANKLE SINGLE	1990	2350	2810
KR25-0484	ULTRASOUND AXILLA (BOTH)	2830	3340	4010
KR25-0485	ULTRASOUND AXILLA (SINGLE)	1630	1920	2300
KR25-0486	ULTRASOUND BIOPHYSICAL STUDY	2600	3060	3660
KR25-0487	ULTRASOUND BIOPHYSICAL STUDY TWINS	3910	4610	5510
KR25-0488	ULTRASOUND BREAST	1840	2170	2590
KR25-0489	ULTRASOUND BREAST ELASTOGRAPHY	2810	3310	3970
KR25-0490	ULTRASOUND B-SCAN FOR ORBIT BOTH	2940	3450	4150
KR25-0491	ULTRASOUND B-SCAN FOR ORBIT SINGLE	1990	2350	2810
KR25-0492	ULTRASOUND CHEST/THORAX	1840	2170	2590
KR25-0493	ULTRASOUND CRANIUM/HEAD	1840	2170	2590
KR25-0494	ULTRASOUND ELBOW (BOTH)	4660	5480	6580
KR25-0495	ULTRASOUND ELBOW (SINGLE)	2330	2740	3290
KR25-0496	ULTRASOUND EMERGENCY CHARGES	1340	1590	1900
KR25-0497	ULTRASOUND EXTREMITY	1840	2170	2590
KR25-0498	ULTRASOUND EYE/ORBITS	1840	2170	2590
KR25-0499	ULTRASOUND FACE	1840	2170	2590
KR25-0500	ULTRASOUND FOLICULAR STUDIES	2200	2590	3110
KR25-0501	ULTRASOUND FOLICULAR STUDY FOR 1 DAY	430	500	600
KR25-0502	ULTRASOUND FOR AFI/PRESENTING PART/FHR ONLY	540	660	780
KR25-0503	ULTRASOUND GUIDED MERINA INSERTION	4370	5140	6170
KR25-0504	ULTRASOUND HIP BOTH IN PEADS	2940	3450	4150
KR25-0505	ULTRASOUND HIP SINGLE	1990	2350	2810
KR25-0506	ULTRASOUND KNEE BOTH	2940	3450	4150

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0507	ULTRASOUND KNEE SINGLE	1990	2350	2810
KR25-0508	ULTRASOUND KUB (FEMALE)	1760	2070	2490
KR25-0509	ULTRASOUND KUB + PVR	1910	2260	2700
KR25-0510	ULTRASOUND KUB MALE	1760	2070	2490
KR25-0511	ULTRASOUND LA & TVS	2250	2640	3160
KR25-0512	ULTRASOUND LIVER ELASTOGRAPHY	2700	3180	3820
KR25-0513	ULTRASOUND LOWER ABDOMEN FEMALE	1760	2070	2490
KR25-0514	ULTRASOUND LOWER ABDOMEN MALE	1760	2070	2490
KR25-0515	ULTRASOUND MARINA	2380	2800	3370
KR25-0516	ULTRASOUND NECK	1840	2170	2590
KR25-0517	ULTRASOUND NECK FOR SALIVARY GLAND	1990	2350	2810
KR25-0518	ULTRASOUND NEONATAL SPINE	1840	2170	2590
KR25-0519	ULTRASOUND OBS FOR CARDIAC ACTIVITY ONLY	540	650	770
KR25-0520	ULTRASOUND OBSTETRIC	1940	2280	2740
KR25-0521	ULTRASOUND OBSTETRIC- TWIN	2920	3420	4120
KR25-0522	ULTRASOUND PELVIS (FEMALE)	1760	2070	2490
KR25-0523	ULTRASOUND PELVIS (MALE)	1760	2070	2490
KR25-0524	ULTRASOUND PELVIS / TVS 3D SCAN	3780	4450	5340
KR25-0525	ULTRASOUND PELVIS + KUB	2130	2500	3000
KR25-0526	ULTRASOUND PORTABLE (EXTRA CHARGES)	850	1010	1210
KR25-0527	ULTRASOUND PVR	430	500	600
KR25-0528	ULTRASOUND SALPINGOGRAPHY/SONO SALPINGOGRAPHY	3770	4420	5320
KR25-0529	ULTRASOUND SCROTUM	1840	2170	2590
KR25-0530	ULTRASOUND SHOULDER	1840	2170	2590
KR25-0531	ULTRASOUND SHOULDER BOTH	2940	3450	4150
KR25-0532	ULTRASOUND SHOULDER SINGLE	1990	2350	2810
KR25-0533	ULTRASOUND SMALL PARTS	1840	2170	2590
KR25-0534	ULTRASOUND THIGH	1840	2170	2590
KR25-0535	ULTRASOUND THYROID	1840	2170	2590
KR25-0536	ULTRASOUND TRUS (TRANSRECTAL ULTRASOUND)	1980	2320	2790
KR25-0537	ULTRASOUND TVS	1840	2170	2590
KR25-0538	ULTRASOUND UPPER + OBS. (EARLY PREG.)	3060	3610	4330
KR25-0539	ULTRASOUND UPPER ABDOMEN	1760	2070	2490
KR25-0540	ULTRASOUND WHOLE ABDOMEN +TVS	2880	3390	4060
KR25-0541	ULTRASOUND WHOLE ABDOMEN FEMALE	2470	2900	3490
KR25-0542	ULTRASOUND WHOLE ABDOMEN MALE	2470	2900	3490
KR25-0543	ULTRASOUND WRIST	1840	2170	2590
KR25-0544	ULTRASOUND WRIST BOTH	2940	3450	4150
KR25-0545	ULTRASOUND WRIST SINGLE	1990	2350	2810

Note : Emergency US-Starts 01:00 PM on Sunday/ Holiday

COLOR DOPPLER

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0546	COLOR DOPPLER A.V. FISTULA DOUBLE LIMBS	7760	9120	10960
KR25-0547	COLOR DOPPLER A.V. FISTULA SINGLE LIMB	5450	6400	7700
KR25-0548	COLOR DOPPLER ABDOMINAL AORTA	3830	4480	5400
KR25-0549	COLOR DOPPLER ARTERIAL BOTH UPPER LIMBS	6670	7860	9440
KR25-0550	COLOR DOPPLER ARTERIAL LEFT LOWER LIMB	3830	4480	5400
KR25-0551	COLOR DOPPLER ARTERIAL LEFT UPPER LIMB	3830	4480	5400
KR25-0552	COLOR DOPPLER ARTERIAL RIGHT LOWER LIMB	3830	4480	5400
KR25-0553	COLOR DOPPLER ARTERIAL RIGHT UPPER LIMB	3830	4480	5400
KR25-0554	COLOR DOPPLER ARTERIAL STUDY BOTH LOWER LIMBS	6670	7860	9440
KR25-0555	COLOR DOPPLER ARTERIAL-VENOUS SINGLE LIMB	6670	7860	9440
KR25-0556	COLOR DOPPLER BED SIDE CHARGES	1180	1380	1660
KR25-0557	COLOR DOPPLER CAROTID	3460	4060	4860
KR25-0558	COLOR DOPPLER EMERGENCY CHARGES (EXTRA CHARGES) PER STUDY	1140	1340	1620
KR25-0559	COLOR DOPPLER FOR VARICOCELE	3460	4060	4860
KR25-0560	COLOR DOPPLER HEPATIC/PORTAL VENOUS	3830	4480	5400
KR25-0561	COLOR DOPPLER ILEO FEMORAL VESSELS (B/L)	3830	4480	5400
KR25-0562	COLOR DOPPLER ILIAC + FEMORAL VESSELS (BOTH VEINS + ARTERIES)	4200	4930	5930
KR25-0563	COLOR DOPPLER MESENTRIC VESSELS	3830	4480	5400
KR25-0564	COLOR DOPPLER NECK VEINS	3460	4340	5180
KR25-0565	COLOR DOPPLER NEOVESSELS BOTH ARTERY+VEINS	6920	8150	9780
KR25-0566	COLOR DOPPLER OBSTETRIC	3960	4680	5600
KR25-0567	COLOR DOPPLER OBSTETRIC- TWIN	5860	6900	8270
KR25-0568	COLOR DOPPLER OBSTETRIC WITH BIOPHYSICAL PROFILE (BPP)	4680	4680	4680
KR25-0569	COLOR DOPPLER OBSTETRIC WITH BIOPHYSICAL PROFILE (BPP) TWINS	7010	7010	7010
KR25-0570	COLOR DOPPLER PENILE	5630	7020	8430
KR25-0571	COLOR DOPPLER RENAL ARTERIES	6670	7860	9440
KR25-0572	COLOR DOPPLER SCORTAL	3460	4060	4860
KR25-0573	COLOR DOPPLER SMALL PART	3360	3960	4750
KR25-0574	COLOR DOPPLER TEMPORAL ARTERY	1990	2350	2810
KR25-0575	COLOR DOPPLER THYROID	2920	3420	4120
KR25-0576	COLOR DOPPLER TRANSPLANT KIDNEY	3460	4060	4860
KR25-0577	COLOR DOPPLER TVS	3460	4060	4860
KR25-0578	COLOR DOPPLER VENOUS BOTH LOWER LIMBS	6670	7860	9440
KR25-0579	COLOR DOPPLER VENOUS LEFT LOWER LIMB	3830	4480	5400
KR25-0580	COLOR DOPPLER VENOUS LEFT UPPER LIMB	3830	4480	5400
KR25-0581	COLOR DOPPLER VENOUS RIGHT LOWER LIMB	3830	4480	5400
KR25-0582	COLOR DOPPLER VENOUS RIGHT UPPER LIMB	3830	4480	5400
KR25-0583	COLOR DOPPLER VENOUS STUDY BOTH UPPER LIMBS	6670	7860	9440
KR25-0584	VENOUS MAPPING LEFT UPPER LIMB	6110	7180	8620
KR25-0585	VENOUS MAPPING RIGHT UPPER LIMB	6110	7180	8620
KR25-0586	VENOUS MAPPING UPPER LIMB (DOUBLE LIMB)	8690	10230	12270

RADIODIAGNOSIS & IMAGING

X-RAY

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0587	20% EXTRA CHARGES OF X-RAY OF EMERGENCY (SINGLE FILM)	120	140	160
KR25-0588	BARIUM ENEMA DOUBLE CONTRAST WITH DIGITAL RADIOGRAPHY	7880	9280	11130
KR25-0589	BARIUM ENEMA. WITH DIGITAL RADIOGRAPHY	5920	6960	8360
KR25-0590	BARIUM MEAL FOLLOW THROUGH WITH DIGITAL RADIOGRAPHY	5920	6960	8360
KR25-0591	BARIUM MEAL UPPER G.I.T (STOMACH & DUODENUM) WITH DIGITAL RADIOGRAPHY	4860	5720	6860
KR25-0592	BARIUM SWALLOW WITH DIGITAL RADIOGRAPHY	3840	4520	5430
KR25-0593	COLONOGRAM WITH DIGITAL RADIOGRAPHY	4050	4760	5720
KR25-0594	CYSTOGRAM WITH DIGITAL RADIOGRAPHY	3940	4640	5570
KR25-0595	DISTAL COLOGRAM WITH DIGITAL RADIOGRAPHY	4300	5060	6070
KR25-0596	FISTULOGRAM CONTRAST INCLUDED WITH DIGITAL RADIOGRAPHY	3400	4000	4800
KR25-0597	GASTROGRAFIN WITH DIGITAL RADIOGRAPHY	4440	5220	6270
KR25-0598	H.S.G. WITH DIGITAL RADIOGRAPHY	4560	5360	6430
KR25-0599	I.V.P. & MICTURATING CYSTO URETHROGRAM (M.C.U.) WITH DIGITAL RADIOGRAPHY	7100	8350	10020
KR25-0600	I.V.P. WITH NON-IONIC CONTRAST (50 ml) WITH DIGITAL RADIOGRAPHY	7530	8860	10630
KR25-0601	LOOPOGRAM WITH DIGITAL RADIOGRAPHY	4440	5220	6270
KR25-0602	M.C.U. & R.G.U. WITH DIGITAL RADIOGRAPHY	6580	7740	9290
KR25-0603	MICTURATING CYSTO URETHROGRAM (M.C.U.) (Paed.)	4500	5290	6350
KR25-0604	MICTURATING CYSTO URETHROGRAM (M.C.U.) WITH DIGITAL RADIOGRAPHY	4310	5070	6080
KR25-0605	NEPHROSTOGRAM WITH DIGITAL RADIOGRAPHY	3560	4190	5030
KR25-0606	OTHER HOSPITAL X-RAY REPORT	300	360	430
KR25-0607	R.G.U. (RETROGRADE URETHROGRAM) WITH DIGITAL RADIOGRAPHY	4320	5080	6100
KR25-0608	SAILOGRAM WITH DIGITAL RADIOGRAPHY	3560	4190	5030
KR25-0609	SINOGRAM WITH DIGITAL RADIOGRAPHY	3310	3900	4670
KR25-0610	T-TUBE CHOLANGIOGRAM WITH DIGITAL RADIOGRAPHY	3560	4190	5030
KR25-0611	TWO VIEWS OF SAME PART IN SINGLE FILM (X-RAY) WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0612	TWO VIEWS OF SAME PART IN TWO FILMS (X-RAY) WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0613	X-RAY ABDOMEN AP VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0614	X-RAY ABDOMEN ERECT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0615	X-RAY ABDOMEN ERECT/ SUPINE VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0616	X-RAY ABDOMEN KUB WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0617	X-RAY ADDITIONAL FILM	210	210	210
KR25-0618	X-RAY APICOGRAM WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0619	X-RAY BOTH ANKLE JOINT AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0620	X-RAY BOTH ANKLE JOINT AP/LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0621	X-RAY BOTH ANKLE LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0622	X-RAY BOTH ARM AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0623	X-RAY BOTH ARM AP/LATERAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0624	X-RAY BOTH ARM LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0625	X-RAY BOTH CALCANIUM AP AXIAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0626	X-RAY BOTH CALCANIUM AXIAL/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0627	X-RAY BOTH CALCANIUM LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0628	X-RAY BOTH CLAVICLE AP VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0629	X-RAY BOTH ELBOW AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0630	X-RAY BOTH ELBOW AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0631	X-RAY BOTH ELBOW LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0632	X-RAY BOTH FEET A.P / OBLIQUE WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0633	X-RAY BOTH FEET AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0634	X-RAY BOTH FEET LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0635	X-RAY BOTH FEET OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0636	X-RAY BOTH FEMUR AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0637	X-RAY BOTH FEMUR AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0638	X-RAY BOTH FEMUR LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0639	X-RAY BOTH FOREARM AP/LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0640	X-RAY BOTH HAND LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0641	X-RAY BOTH HAND P.A WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0642	X-RAY BOTH HAND P.A. / OBLIQUE WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0643	X-RAY BOTH HEEL AXIAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0644	X-RAY BOTH HEEL AXIAL/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0645	X-RAY BOTH HEEL LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0646	X-RAY BOTH HIP AP / LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0647	X-RAY BOTH HIP AP WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0648	X-RAY BOTH HIP LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0649	X-RAY BOTH KNEE AP STANDING WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0650	X-RAY BOTH KNEE AP VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0651	X-RAY BOTH KNEE AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0652	X-RAY BOTH KNEE LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0653	X-RAY BOTH KNEES SKYLINE VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0654	X-RAY BOTH LEG AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0655	X-RAY BOTH LEG AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0656	X-RAY BOTH LEG LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0657	X-RAY BOTH MANDIBLE OBLIQUE WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0658	X-RAY BOTH MASTOID OBLIQUE WITH DIGITAL RADIOGRAPHY	1070	1260	1510
KR25-0659	X-RAY BOTH ORBIT LATERAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0660	X-RAY BOTH ORBIT PA VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0661	X-RAY BOTH ORBIT PA/LATERAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0662	X-RAY BOTH PATELLA AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0663	X-RAY BOTH PATELLA AP/LATERAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0664	X-RAY BOTH PATELLA LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0665	X-RAY BOTH PATELLA SKYLINE VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0666	X-RAY BOTH S.I. JOINT OBLI WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0667	X-RAY BOTH S.I. JOINT PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0668	X-RAY BOTH S.I. JOINTS P.A./OBLIQUE WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0669	X-RAY BOTH SHOULDER AP VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0670	X-RAY BOTH SHOULDER AP/AXIAL WITH DIGITAL RADIOGRAPHY	1020	1190	1440

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0671	X-RAY BOTH THIGH AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0672	X-RAY BOTH THIGH AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0673	X-RAY BOTH THIGH LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0674	X-RAY BOTH THUMB P.A. WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0675	X-RAY BOTH TM JOINT OPEN & CLOSE MOUTH WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0676	X-RAY BOTH WRIST AP VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0677	X-RAY BOTH WRIST AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0678	X-RAY BOTH WRIST LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0679	X-RAY BOTH WRIST PA/SCAPHOID VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0680	X-RAY C.V. JUNCTION FLEXION, EXTENSION & NEUTRAL WITH DIGITAL RADIOGRAPHY	1220	1440	1730
KR25-0681	X-RAY CALCANIUM LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0682	X-RAY CERVICAL SPINE AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0683	X-RAY CERVICAL SPINE AP/ LAT VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0684	X-RAY CERVICAL SPINE BOTH OBL. WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0685	X-RAY CERVICAL SPINE FLEXION & EXTENSION WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0686	X-RAY CERVICAL SPINE LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0687	X-RAY CERVICAL SPINE LEFT OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0688	X-RAY CERVICAL SPINE RIGHT OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0689	X-RAY CERVICO-DORSAL SPINE AP/OBLIQUE WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0690	X-RAY CHEST AP PORTABLE WITH DIGITAL RADIOGRAPHY	800	940	1130
KR25-0691	X-RAY CHEST AP VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0692	X-RAY CHEST AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0693	X-RAY CHEST FOR RIBS (AP VIEW) WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0694	X-RAY CHEST LATERAL DECUBITUS WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0695	X-RAY CHEST LEFT LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0696	X-RAY CHEST P.A. VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0697	X-RAY CHEST PA/LATERAL VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0698	X-RAY CHEST RIGHT LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0699	X-RAY COCCYX AP/LATERAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0700	X-RAY COCCYX LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0701	X-RAY DENTAL (FIVE FILM)	1310	1540	1850
KR25-0702	X-RAY DENTAL (FOUR FILM)	1060	1250	1490
KR25-0703	X-RAY DENTAL (ONE FILM)	280	330	400
KR25-0704	X-RAY DENTAL (THREE FILM)	800	940	1130
KR25-0705	X-RAY DENTAL (TWO FILM)	590	690	830
KR25-0706	X-RAY DISTAL LOOPOGRAM / COLOGRAM WITH DIGITAL RADIOGRAPHY	3730	4390	5260
KR25-0707	X-RAY DORSAL SPINE AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0708	X-RAY DORSAL SPINE AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0709	X-RAY DORSAL SPINE LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0710	X-RAY DORSOLUMBAR SPINE AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0711	X-RAY DORSOLUMBAR SPINE AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0712	X-RAY DORSOLUMBAR SPINE LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0713	X-RAY FINGER PA/ LAT/OBLIQUE (FOR ANY TWO VIEWS) WITH DIGITAL RADIOGRAPHY	590	690	830

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0714	X-RAY GASTROGRAFIN STUDY WITH DIGITAL RADIOGRAPHY	3830	4510	5410
KR25-0715	X-RAY HAND AP VIEW (BONE AGE) WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0716	X-RAY HUMEROUS AP/LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0717	X-RAY JAW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0718	X-RAY LEFT ANKLE JOINT AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0719	X-RAY LEFT ANKLE JOINT AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0720	X-RAY LEFT ANKLE JOINT LATERAL VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0721	X-RAY LEFT ARM AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0722	X-RAY LEFT ARM AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0723	X-RAY LEFT ARM LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0724	X-RAY LEFT CALCANIUM AXIAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0725	X-RAY LEFT CALCANIUM AXIAL/LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0726	X-RAY LEFT CALCANIUM LATERAL VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0727	X-RAY LEFT CLAVICLE AP VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0728	X-RAY LEFT ELBOW AP VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0729	X-RAY LEFT ELBOW JOINT AP / LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0730	X-RAY LEFT ELBOW LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0731	X-RAY LEFT FEMUR AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0732	X-RAY LEFT FEMUR AP/LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0733	X-RAY LEFT FEMUR LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0734	X-RAY LEFT FINGER AP/LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0735	X-RAY LEFT FOOT AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0736	X-RAY LEFT FOOT AP/OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0737	X-RAY LEFT FOOT LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0738	X-RAY LEFT FOOT OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0739	X-RAY LEFT FOREARM AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0740	X-RAY LEFT HAND LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0741	X-RAY LEFT HAND P.A. / OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0742	X-RAY LEFT HAND PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0743	X-RAY LEFT HEEL AXIAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0744	X-RAY LEFT HEEL AXIAL/LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0745	X-RAY LEFT HEEL LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0746	X-RAY LEFT HIP AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0747	X-RAY LEFT HIP AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0748	X-RAY LEFT HIP LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0749	X-RAY LEFT KNEE AP /LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0750	X-RAY LEFT KNEE AP STANDING WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0751	X-RAY LEFT KNEE AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0752	X-RAY LEFT KNEE LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0753	X-RAY LEFT KNEES SKYLINE VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0754	X-RAY LEFT LEG AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0755	X-RAY LEFT LEG AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0756	X-RAY LEFT LEG LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830

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Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0757	X-RAY LEFT MANDIBLE OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0758	X-RAY LEFT MASTOID OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0759	X-RAY LEFT S.I. JOINT PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0760	X-RAY LEFT S.I. JOINT PA/OBLIQUE WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0761	X-RAY LEFT SHOULDER AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0762	X-RAY LEFT SHOULDER AP/ AXIAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0763	X-RAY LEFT SHOULDER AXIAL VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0764	X-RAY LEFT SHOULDER LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0765	X-RAY LEFT T.M. JOINT OBLIQUE (OPEN & CLOSED MOUTH) WITH DIGITAL RADIOGRAPHY	1070	1260	1510
KR25-0766	X-RAY LEFT THIGH AP / LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0767	X-RAY LEFT THIGH AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0768	X-RAY LEFT THIGH LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0769	X-RAY LEFT THUMB AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0770	X-RAY LEFT THUMB LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0771	X-RAY LEFT THUMB PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0772	X-RAY LEFT TIBIA AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0773	X-RAY LEFT TIBIA AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0774	X-RAY LEFT TIBIA LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0775	X-RAY LEFT TOE AP/LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0776	X-RAY LEFT WRIST LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0777	X-RAY LEFT WRIST PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0778	X-RAY LEFT WRIST PA/LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0779	X-RAY LEFT WRIST PA/OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0780	X-RAY LEFT WRIST PA/SCAPHOID VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0781	X-RAY LS SPINE AP VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0782	X-RAY LS SPINE AP/ LAT VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0783	X-RAY LS SPINE BOTH OBLIQUE VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0784	X-RAY LS SPINE FLEXION / EXTENSION WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0785	X-RAY LS SPINE LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0786	X-RAY MANDIBLE AP VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0787	X-RAY MANDIBLE LEFT LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0788	X-RAY MANDIBLE P.A. VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0789	X-RAY MANDIBLE PA/ LATERAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0790	X-RAY MANDIBLE RIGHT LETERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0791	X-RAY MASTOID LT. LAT. OBLIQUE VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0792	X-RAY MASTOID RT. LAT. OBLIQUE VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0793	X-RAY NASAL BONE LATERAL (BOTH VIEWS) WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0794	X-RAY NASO PHARYNX LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0795	X-RAY NECK AP/LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0796	X-RAY NECK LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0797	X-RAY O.P.G WITH DIGITAL RADIOGRAPHY	780	920	1110
KR25-0798	X-RAY OPEN MOUTH WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0799	X-RAY ORBIT LAT WITH DIGITAL RADIOGRAPHY	590	690	830

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0800	X-RAY ORBIT PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0801	X-RAY P.N.S WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0802	X-RAY P.N.S. PA/ LATERAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0803	X-RAY PELVIS AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0804	X-RAY PELVIS FROGS VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0805	X-RAY PORTABLE (Service Charge Only)	340	400	470
KR25-0806	X-RAY PORTABLE WITH VAN & PPE KIT CHARGES	1610	1890	2280
KR25-0807	X-RAY RIGHT ANKLE JOINT AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0808	X-RAY RIGHT ANKLE JOINT AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0809	X-RAY RIGHT ANKLE JOINT LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0810	X-RAY RIGHT ARM AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0811	X-RAY RIGHT ARM AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0812	X-RAY RIGHT ARM LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0813	X-RAY RIGHT CALCANIUM AXIAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0814	X-RAY RIGHT CALCANIUM AXIAL/LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0815	X-RAY RIGHT CALCANIUM LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0816	X-RAY RIGHT CLAVICLE AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0817	X-RAY RIGHT ELBOW AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0818	X-RAY RIGHT ELBOW JOINT AP/ LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0819	X-RAY RIGHT ELBOW LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0820	X-RAY RIGHT FEMUR AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0821	X-RAY RIGHT FEMUR AP/ LETERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0822	X-RAY RIGHT FEMUR LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0823	X-RAY RIGHT FINGER AP/LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0824	X-RAY RIGHT FOOT AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0825	X-RAY RIGHT FOOT AP/ OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0826	X-RAY RIGHT FOOT LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0827	X-RAY RIGHT FOOT OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0828	X-RAY RIGHT FORE ARM AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0829	X-RAY RIGHT HAND LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0830	X-RAY RIGHT HAND PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0831	X-RAY RIGHT HAND PA/OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0832	X-RAY RIGHT HEEL AXIAL VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0833	X-RAY RIGHT HEEL AXIAL/LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0834	X-RAY RIGHT HEEL LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0835	X-RAY RIGHT HIP AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0836	X-RAY RIGHT HIP AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0837	X-RAY RIGHT HIP LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0838	X-RAY RIGHT KNEE AP STANDING WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0839	X-RAY RIGHT KNEE AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0840	X-RAY RIGHT KNEE AP/ LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0841	X-RAY RIGHT KNEE LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0842	X-RAY RIGHT KNEE SKYLINE VIEW WITH DIGITAL RADIOGRAPHY	590	690	830

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0843	X-RAY RIGHT LEG AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0844	X-RAY RIGHT LEG AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0845	X-RAY RIGHT LEG LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0846	X-RAY RIGHT MANDIBLE OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0847	X-RAY RIGHT MASTOID OBLIQUE WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0848	X-RAY RIGHT S.I. JOINT PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0849	X-RAY RIGHT S.I. JOINT PA/OBLIQUE WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0850	X-RAY RIGHT SHOULDER AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0851	X-RAY RIGHT SHOULDER AP/ AXIAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0852	X-RAY RIGHT SHOULDER AXIAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0853	X-RAY RIGHT SHOULDER LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0854	X-RAY RIGHT T.M. JOINT OBLIQUE (OPEN & CLOSED MOUTH) WITH DIGITAL RADIOGRAPHY	1070	1260	1510
KR25-0855	X-RAY RIGHT THIGH AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0856	X-RAY RIGHT THIGH AP/ LAT VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0857	X-RAY RIGHT THIGH LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0858	X-RAY RIGHT THUMB AP / LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0859	X-RAY RIGHT THUMB LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0860	X-RAY RIGHT THUMB PA VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0861	X-RAY RIGHT TIBIA AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0862	X-RAY RIGHT TIBIA AP/LAT WITH DIGITAL RADIOGRAPHY	1020	1190	1440
KR25-0863	X-RAY RIGHT TIBIA LAT WITH DIGITAL RADIOGRAPHY	570	670	790
KR25-0864	X-RAY RIGHT TOE AP/ LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0865	X-RAY RIGHT WRIST LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0866	X-RAY RIGHT WRIST PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0867	X-RAY RIGHT WRIST PA/LATERAL/OBLIQUE (FOR ANY TWO VIEWS) WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0868	X-RAY RIGHT WRIST PA/SCAPHOID VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0869	X-RAY S I JOINT P A WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0870	X-RAY SACROCOCCYGEAL SPINE AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0871	X-RAY SACROCOCCYGEAL SPINE AP/LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0872	X-RAY SACROCOCCYGEAL SPINE LAT WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0873	X-RAY SCANNOGRAM FULL SPINE (AP) WITH DIGITAL RADIOGRAPHY	1770	2090	2510
KR25-0874	X-RAY SCANNOGRAM FULL SPINE (LAT) WITH DIGITAL RADIOGRAPHY	1770	2090	2510
KR25-0875	X-RAY SCANNOGRAM LOWER LIMBS WITH DIGITAL RADIOGRAPHY	1770	2090	2510
KR25-0876	X-RAY SCAPULA AP/LATERAL WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0877	X-RAY SELLA TURCICA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0878	X-RAY SINGLE FILM (ANY X-RAY) WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0879	X-RAY SKULL AP/ LAT VIEW WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0880	X-RAY SKULL BASAL VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0881	X-RAY SKULL LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0882	X-RAY SKULL PA WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0883	X-RAY SKULL TOWNES VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0884	X-RAY SOFT TISSUE NECK- LAT (FOR ADENOID) WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0885	X-RAY STERNUM AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0886	X-RAY STERNUM LAT VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0887	X-RAY STYLOID PROCESS (TOWNES VIEW) WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0888	X-RAY SUBMENTAL VERTICAL VIEW WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0889	X-RAY THORACIC SPINE AP WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0890	X-RAY THORACIC SPINE AP/ LAT WITH DIGITAL RADIOGRAPHY	1060	1250	1490
KR25-0891	X-RAY THORACIC SPINE LATERAL WITH DIGITAL RADIOGRAPHY	590	690	830
KR25-0892	X-RAY TOWNES VIEW WITH DIGITAL RADIOGRAPHY	590	690	830

MAMMOGRAPHY

KR25-0893	MAMMOGRAPHY (BOTH BREAST) WITH DIGITAL RADIOGRAPHY	3490	4090	4950
KR25-0894	MAMMOGRAPHY (SINGLE BREAST) WITH DIGITAL RADIOGRAPHY	1760	2060	2460

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
	ECG			
KR25-0895	ECG (BED SIDE)	410	480	570
KR25-0896	ECG (RESTING)	330	380	470
KR25-0897	HOLTER MONITORING	3270	3270	3270
	TMT			
KR25-0898	TMT	2210	2210	2210
	ECHO			
KR25-0899	BED SIDE ECHO	4440	5210	6270
KR25-0900	BED SIDE PAEDIATRIC ECHO	5170	6080	7300
KR25-0901	DOBUTAMIN STRESS ECHO	5310	5310	5310
KR25-0902	ECHO COLOUR DOPPLER	3190	3190	3190
KR25-0903	ECHO CONTRAST	4850	4850	4850
KR25-0904	ECHO DOPPLER - CARDIAC & CAROTID (WHEN DONE IN ONE SITTING)	6720	7900	9490
KR25-0905	ECHO DOPPLER - CARDIAC & PERI. VASCULAR(WHEN DONE IN ONE SITTING)	6720	7900	9490
KR25-0906	ECHO SCREENING (BEDSIDE EMERGENCY)	2120	2500	3000
KR25-0907	ECHO SCREENING BEDSIDE	1270	1500	1810
KR25-0908	EMERGENCY ECHO EXTRA CHARGES	970	1130	1370
KR25-0909	FETAL ECHO SINGLE FETUS	4700	5530	6620
KR25-0910	FOETAL ECHO	4050	4750	5700
KR25-0911	HEAD TILT TEST	3800	3800	3800
KR25-0912	PAEDIATRIC ECHO	4320	4320	4320
KR25-0913	STRESS ECHO	5150	5150	5150
KR25-0914	TOCOCARDIOGRAH MONITORING	3200	3790	4540
KR25-0915	TRANSOESOPHAGEAL ECHO	5770	6780	8130
	PULMONARY FUNCTION TEST			
KR25-0916	PFT - DETAILED (SPIRO+BDR+DIFF)	3740	4400	5270
KR25-0917	PFT (PULMONARY FUNCTION TEST) WITH NEBULIZATION	2400	2820	3370
KR25-0918	PFT (PULMONARY FUNCTION TEST/SPIROMETRY)	1640	1920	2320
KR25-0919	PFT WITH BRONCODILATOR	3120	3660	4400
	OTHER DIAGNOSTIC INVESTIGATIONS PROCEDURE			
KR25-0920	E.E.G	2570	3020	3630
KR25-0921	E.E.G. PORTABLE CHARGE	640	760	910
KR25-0922	ELECTROENCEPHALOGRAM (EEG) - OVERNIGHT STUDY (IPD)	7920	9900	11880
KR25-0923	ELECTROENCEPHALOGRAM (EEG) - UPTO ONE HOUR	3520	4400	5280
KR25-0924	ELECTROENCEPHALOGRAM (EEG) EXTENDED - Additional Each Hour	1690	1690	1690
KR25-0925	NCS (SSR) - TWO LIMBS	3080	3630	4170
KR25-0926	PERCUTANEOUS VERTEBRAL BIOPSY	24470	28790	34550
KR25-0927	REPETITIVE NERVE SIMULATION	5480	5480	5480
KR25-0928	SLEEP STUDY (POLY SOMNO GRAPHY)	17070	17070	17070

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-0929	UROFLOWMETRY	1690	1690	1690
KR25-0930	UROFLOWMETRY (Paed.)	2000	2000	2000
KR25-0931	VIDEO EEG (12 HOURS) (PAED.)	15000	15000	15000
KR25-0932	VIDEO EEG (24 HOURS) (PAED.)	25000	25000	25000
KR25-0933	VNG-VIDEO NYSTAGMOGRAPHY	10800	10800	10800

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
	NEURO SCIENCES - ELECTROPHYSIOLOGICAL STUDIES			
	NERVE CONDUCTION STUDIES(NCS)			
KR25-0934	NCS ALL FOUR LIMBS	6680	7850	9430
KR25-0935	NCS ALL FOUR LIMBS + LUMBOSACRAL PLEXUS STUDY	8030	9450	11330
KR25-0936	NCS BERA TEST	4720	5570	6680
KR25-0937	NCS BOTH LOWER LIMBS	4320	5080	6080
KR25-0938	NCS BOTH LOWER LIMBS + LUMBOSACRAL PLEXUS STUDY	5870	6910	8300
KR25-0939	NCS BOTH UPPER LIMBS	4320	5080	6080
KR25-0940	NCS BRACHIAL PLEXUS STUDY	6680	7850	9430
KR25-0941	NCS FACIAL NERVE WITH BLINK REFLEX	3970	4670	5600
KR25-0942	NCS FACIAL STUDY	4420	5210	6260
KR25-0943	NCS PORTABLE CHARGE	650	770	930
KR25-0944	NCS SINGLE LIMB	2860	3390	4040
KR25-0945	NCS TWO LIMBS	4320	5080	6080
KR25-0946	NCS VEP TEST	4600	5410	6490
KR25-0947	NCS WITH RNS STUDY	5870	6920	8320
	ELECTROMYOGRAPHIC STUDIES(EMG)			
KR25-0948	EMG ALL FOUR LIMBS	6530	7680	9230
KR25-0949	EMG ONE LIMB	3660	4340	5180
KR25-0950	EMG TWO LIMBS	4890	5760	6910
KR25-0951	NCS +EMG FOUR LIMBS	9800	11530	13840
KR25-0952	NCS +EMG SINGLE LIMB	5730	6720	8070
KR25-0953	NCS +EMG TWO LIMBS	6530	7680	9230
	BONE DENSTOMETRY			
KR25-0954	BONE DENSITOMETRY (ONE SIDE)	3160	3720	4450
KR25-0955	BONE DENSITOMETRY (THREE SIDES)	7090	8340	10010
KR25-0956	BONE DENSITOMETRY (TWO SIDES)	4740	5560	6680
KR25-0957	DEXA FOR IMPLANT CASES (Orthopedic)	7870	9260	11120
KR25-0958	DEXA FOR PEADEATRIC	4720	5550	6670
KR25-0959	DEXA FOR WHOLE BODY FAT ANALYSIS	5770	6790	8150
KR25-0960	DEXA SPINE DVA (LEFT LAT)	5910	6950	8350
KR25-0961	DEXA SPINE DVA (RIGHT LAT)	5910	6950	8350
KR25-0962	DEXA WHOLE BODY SCAN	7350	8640	10370

RADIODIAGNOSIS & IMAGING

NUCLEAR IMAGING TEST

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KRO25-0963	BARIUM ELECTROGELYCINE WITH TUBE	6190	6190	6190
KRO25-0964	BRAIN PET-CT ROUTINE (WITHOUT CONTRAST)	21980	21980	21980
KRO25-0965	CAPTOPRIL INTERVENTION RENOGRAM	12370	14550	17460
KRO25-0966	CARDIAC PET-CT FDG PET WITH PERFUSION	26850	26850	26850
KRO25-0967	CARDIAC PET-CT FDG PET WITHOUT PERFUSION	6400	7370	8650
KRO25-0968	CISTERNOGRAPHY/CSF FLOW STUDIES	9900	11630	13960
KRO25-0969	DACRYOSCINTIGRAPY	4950	5830	6990
KRO25-0970	DMSA V SCAN	9900	11630	13960
KRO25-0971	DOTANOC SCAN (DOTA PET)	24200	24200	24200
KRO25-0972	DRCG SCAN	4950	5830	6990
KRO25-0973	ESOPHAGEAL TRANSIT TIME	3300	3880	4660
KRO25-0974	F-18 DOPA BRAIN PET	24000	28240	33880
KRO25-0975	F-18 DOPA WHOLE BODY PET-CT WITH CONTRAST	30000	35290	42350
KRO25-0976	F-18 DOPA WHOLE BODY PET-CT WITHOUT CONTRAST	29200	34350	41220
KRO25-0977	FIRST PASS SCAN	3300	3880	4660
KRO25-0978	GALLIUM WHOLE BODY SCAN	29700	34940	41940
KRO25-0979	GASTRIC EMPTYING TIME SCAN	4950	5830	6990
KRO25-0980	GASTROESOPHAGEAL REFLUX SCAN	4130	4850	5820
KRO25-0981	GER TEST	4820	4820	4820
KRO25-0982	GHA BRAIN SPECT	9900	11630	13960
KRO25-0983	GI BLEED SCAN	8250	9700	11640
KRO25-0984	HEPATOBILIARY SCAN	5760	6780	8140
KRO25-0985	IODINE 10-15 MCI IODINE- (5-10) MCI (Medicine Cost) Procedure Cost Extra	16600	19530	23440
KRO25-0986	IODINE 131 (100) MCI (Medicine Cost) Procedure Cost Extra	40000	47060	56470
KRO25-0987	IODINE 131 (200) MCI (Medicine Cost) Procedure Cost Extra	70000	82350	98820
KRO25-0988	IODINE 131 (50) MCI (Medicine Cost) Procedure Cost Extra	20000	23530	28240
KRO25-0989	IODINE 5-10 MCI IODINE- (5-10) MCI (Medicine Cost) Procedure Cost Extra	12000	14120	16940
KRO25-0990	IODINE WHOLE BODY SCAN	8250	9700	11640
KRO25-0991	LIVER AND SPLEEN COLLOID SCAN	6590	7750	9300
KRO25-0992	LU – 177 THERPY 100 MCI (Medicine Cost) Procedure Cost Extra	95000	111770	134120
KRO25-0993	LU – 177 THERPY 150 MCI (Medicine Cost) Procedure Cost Extra	120000	141180	169410
KRO25-0994	LU - 177 THERPY 200 MCI (Medicine Cost) Procedure Cost Extra	150200	176710	212050
KRO25-0995	LUNG PERFUSION SCAN	5760	6780	8140
KRO25-0996	LUNG VENTILATION SCAN	4950	5830	6990
KRO25-0997	LUNG VENTILATION/PERFUSION SCAN	10720	12610	15140
KRO25-0998	LYMPHANGIOSCINTIGRAPHY	7420	8750	10470
KRO25-0999	LYMPHATIC MAPPING	4130	4850	5820
KRO25-1000	MECKELS SCAN	4130	4850	5820
KRO25-1001	MIBG SCAN	33010	38830	46590
KRO25-1002	MIBI BRAIN TUMOUR IMAGING	18130	21350	25620
KRO25-1003	MIBI PARATHYROID SCAN	11550	13600	16300

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KRO25-1004	MUGA DOBUTAMINE STRESS	8250	9700	11640
KRO25-1005	MUGA RESTING	6590	7750	9300
KRO25-1006	MYOCARDIAL VIABILITY ASSESSMENT	17320	20370	24450
KRO25-1007	OCTREOTIDE SCAN	123770	145600	174730
KRO25-1008	P-32 THERAPHY FOR BONE PAINPALLAITION	19790	23300	27950
KRO25-1009	PET CT EXTRA CD CHARGES	590	590	590
KRO25-1010	PET CT EXTRA FILM CHARGES	350	410	470
KRO25-1011	PET REVIEW (OUTSIDE SCAN)	5110	5110	5110
KRO25-1012	PET RT PLANNING	6800	7820	9190
KRO25-1013	PET-CT 4D GATED CT WITH CONTRAST	17910	17910	17910
KRO25-1014	PET-CT 4D GATED PET WITH CONTRAST	30670	30670	30670
KRO25-1015	PHARMACOLOGICAL STRESS MYOCARDIAL PERFUSION SCAN	17320	20370	24450
KRO25-1016	PSMA PET	31500	31500	31500
KRO25-1017	RBC LIVER/SPLEEN SCAN	6590	7750	9300
KRO25-1018	REGIONAL PET-CT	24910	24910	24910
KRO25-1019	RENAL DMSA SCAN	7420	8750	10470
KRO25-1020	RENAL TRANSPLANT DTPA SCAN	6590	7750	9300
KRO25-1021	SALIVARY GLAND SCAN	3300	3880	4660
KRO25-1022	SAMARIUM THERAPY FOR BONE PAIN PALLATION	33010	38830	46590
KRO25-1023	SCAN FOR PLEURO-PERITONEAL LEAK	5760	6780	8140
KRO25-1024	SCINTIMAMMOGRAPHY	9900	11630	13960
KRO25-1025	SENTINEL LYMPH NODE MAPPING	4130	4850	5820
KRO25-1026	SPECT CEREBRAL PERFUSION (TOTAL) SCAN	24750	29130	34930
KRO25-1027	SPECT CEREBRAL PERFUSION PRE AND POST ACETAZOLAMIDE	33010	38830	46590
KRO25-1028	SPECT CEREBRAL PERFUSION SCAN	18130	21350	25620
KRO25-1029	STRESS MYOCARDIAL PERFUSION SCAN	17320	20370	24450
KRO25-1030	STRONTIUM THERAPY FOR BONE PAIN PALLAITION	123770	145600	174730
KRO25-1031	TC 99 THYROID SCAN	5800	6820	8190
KRO25-1032	TECHNITIUM THYROID SCAN	4130	4850	5820
KRO25-1033	TESTICULAR SCAN	5760	6780	8140
KRO25-1034	THALLIAUM SCAN	15130	15130	15130
KRO25-1035	THREE PHASE BONE SCAN	7420	8750	10470
KRO25-1036	URODYNAMIC STUDY	6750	6750	6750
KRO25-1037	VENOGRAPHY	7420	8750	10470
KRO25-1038	WHOLE BODY BONE SCAN	7220	8500	10180
KRO25-1039	WHOLE BODY PET-CT WITH CONTRAST	27380	27380	27380
KRO25-1040	WHOLE BODY PET-CT WITHOUT CONTRAST	25260	25260	25260
KRO25-1041	YTTRIUM FOR RADIATION SYNOVECTOMY	33010	38830	46590

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
	INTERVENTIONAL RADIOLOGY PROCEDURES			
KR25-1042	ANTEGRADE URETERIC STENTING	20000	23530	28230
KR25-1043	B/L INTERNAL ILIAC ARTERY BALLOON CATHETER PLACEMENT	52500	61760	74120
KR25-1044	BALLOON ANGIOPLASTY COMPLEX	63000	74120	88950
KR25-1045	BALLOON TEST OCCLUSION	70560	82910	99490
KR25-1046	BARTO/PARTO FOR VARIX	70560	82910	99490
KR25-1047	BRONCHIAL ARTERY EMBOLISATION	49610	58300	69950
KR25-1048	CAROTID STENTING (RADIOLOGY)	61620	72500	87000
KR25-1049	CATHETER DIRECTED THROMBOLYSIS (1st Session)	41450	51820	62180
KR25-1050	CATHETER DIRECTED THROMBOLYSIS (EACH SESSION AFTER FIRST SESSION)	20370	23960	28750
KR25-1051	CELIAC ARTERY STENTING	63000	74120	88950
KR25-1052	CYST ABLATION	11250	13210	15850
KR25-1053	DIAGNOSTIC PERIPHERAL ANGIOGRAPHY	22050	25950	31130
KR25-1054	DIALYSIS FISTULA (FISTULOGRAM WITH PLASTY)	43280	50860	61030
KR25-1055	DIRECT INTRAHEPATIC PORTO SYSTEMIC SHUNT (DIPSS)	80000	94120	112940
KR25-1056	DRAINAGE CATHETER REMOVAL	2500	2500	2500
KR25-1057	DSA CEREBRAL	16540	19440	23320
KR25-1058	DSA-PERIPHERAL	16800	19760	23720
KR25-1059	EMBOLIZATION FOR BLEEDING	49610	58300	69950
KR25-1060	EMBOLIZATION IN TRAUMA	49610	58300	69950
KR25-1061	ENDOVASCULAR AORTIC ANEURYSM REPAIR (EVAR)	95000	111760	134120
KR25-1062	ENDOVASCULAR COILING	63000	74120	88950
KR25-1063	ENDOVASCULAR MECHANICAL THROMBECTOMY	47250	55590	66710
KR25-1064	ENDOVASCULAR REMOVAL OF FOREIGN BODY	15750	18530	22240
KR25-1065	ENDOVASCULAR STENT GRAFT	52500	61760	74120
KR25-1066	IMAGE GUIDED CHEMO PORT INSERTION	21000	24740	29650
KR25-1067	IMAGE GUIDED DOUBLE LUMEN DIALYSIS CATHETER INSERTION	7350	7350	7350
KR25-1068	IMAGE GUIDED FNAC COMPLEX	8920	10500	12600
KR25-1069	IMAGE GUIDED MUSCULOSKELETAL INTERVENTIONS	10500	12360	14830
KR25-1070	IMAGE GUIDED NEUROLYTIC BLOCK	16540	19440	23320
KR25-1071	IMAGE GUIDED PERCUTANEOUS NEEDLE BIOPSY COMPLEX	15750	18530	22240
KR25-1072	IMAGE GUIDED PERCUTANEOUS RENAL BIOPSY	14990	18740	22490
KR25-1073	IMAGE GUIDED PERCUTANEOUS SPECIALIZED BIOPSY	14990	18740	22490
KR25-1074	IMAGE GUIDED PICC LINE INSERTION	9090	10690	12830
KR25-1075	IMAGE GUIDED TUBE EXCHANGE/UPSIZING	9700	12130	14550
KR25-1076	IMAGE GUIDED TUNNELED CATHETER INSERTION	18480	21740	26090
KR25-1077	IMAGE GUIDED VERTEBRAL BIOPSY	21000	24710	29650
KR25-1078	INTERNALIZATION OF BILIARY CATHETER	15750	18530	22240

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-1079	INTERVENTIONAL RADIOLOGY (OTHER MAJOR) PROCEDURE	27000	31760	38120
KR25-1080	INTERVENTIONAL RADIOLOGY (OTHER MINOR) PROCEDURE	18000	21180	25410
KR25-1081	INTRAARTERIAL VASODILATATION	22050	25900	31090
KR25-1082	INTRALUMINAL ABLATION	37480	44050	52860
KR25-1083	INVASIVE PRESSURE MEASUREMENT	11910	14880	17860
KR25-1084	IVC FILTER PLACEMENT	34630	40700	48820
KR25-1085	IVC FILTER RETRIEVAL	17080	20090	24100
KR25-1086	LIMB (PERIPHERAL) ANGIOPLASTY	34440	40520	48610
KR25-1087	LIMB (PERIPHERAL) STENTING	44280	52090	62510
KR25-1088	LIVER TUMOR (TACE)	69260	81390	97660
KR25-1089	LYMPHANGIOGRAPHY	14990	18740	22490
KR25-1090	MICROWAVE ABLATION/ CRYOABLATION	50400	59290	71160
KR25-1091	PARENT VESSEL OCCLUSION	46300	54410	65290
KR25-1092	PERCUTANEOUS BALLOON DILATATION OF STRICTURE	22050	25950	31130
KR25-1093	PERCUTANEOUS BILIARY STENTING (BILATERAL)	31500	37050	44470
KR25-1094	PERCUTANEOUS BILIARY STENTING (UNILATERAL)	21000	24710	29650
KR25-1095	PERCUTANEOUS CATHETER DRAINAGE OF ABSCESS/ COLLECTION (COMPLEX)	15750	18530	22240
KR25-1096	PERCUTANEOUS CATHETER DRAINAGE OF PANCREATIC / PERIPANCREATIC COLLECTIONS	20000	23530	28230
KR25-1097	PERCUTANEOUS CHOLECYSTOSTOMY	25970	30500	36600
KR25-1098	PERCUTANEOUS CYSTOGASTROSTOMY	25000	29410	35290
KR25-1099	PERCUTANEOUS GASTROSTOMY	25970	32460	38950
KR25-1100	PERCUTANEOUS NEPHROSTOMY (UNILATERAL)	16540	19460	23350
KR25-1101	PERCUTANEOUS SCLEROTHERAPY (EACH SESSION AFTER FIRST SESSION)	13870	16300	19560
KR25-1102	PERCUTANEOUS SCLEROTHERAPY (FIRST SESSION)	17300	20340	24410
KR25-1103	PERCUTANEOUS THROMBIN/GLUE INJECTION OF PSEUDOANEURYSM	19840	23320	27980
KR25-1104	PERCUTANEOUS TRANSHEPATIC CHOLANGIOGRAPHY	17640	22050	26460
KR25-1105	PERCUTANEOUS URETERIC STENTING	34750	43440	52120
KR25-1106	PERCUTANEOUS VERTEBROPLASTY	38590	45400	54480
KR25-1107	PERIPHERAL ARTERY EMBOLIZATION	49610	64250	69950
KR25-1108	PERIPHERAL STENTING COMPLEX	78750	92650	111170
KR25-1109	PERIPHERAL VENOGRAM	17700	20830	25000
KR25-1110	PORTAL VEIN EMBOLIZATION	53620	63090	75710
KR25-1111	PORTAL VEIN STENTING	60000	70590	84710
KR25-1112	PREOPERATIVE EMBOLIZATION	49550	58300	69950
KR25-1113	PROSTATE ARTERY EMBOLIZATION (B/L)	57750	67950	81530
KR25-1114	PTBD (Percutaneous Transhepatic Biliary Drainage)	51940	61030	73240
KR25-1115	RENAL ARTERY STENTING	63000	74120	88950
KR25-1116	RENAL BLEED / TUMOUR EMBOLISATION	49610	58300	69950
KR25-1117	RFA FOR TUMOR ABLATION (Single Lesion)	39350	46300	55570
KR25-1118	RFA/Laser ablation of Varicose Vein - Single Limb - Package(1 day Pkg. Including Laser Charges)	143320	168630	202360

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-1119	SELECTIVE ABDOMINAL ANGIOGRAPHY	22050	25950	31130
KR25-1120	SELECTIVE ABDOMINAL VESSEL EMBOLIZATION (POST TRAUMA, PSEUDOANEURYSM, UNCONTROLLED BLEEDING)	49550	58300	69950
KR25-1121	SMA STENTING	63000	74120	88950
KR25-1122	SPLENIC ARTERY EMBOLISATION	49610	58300	69950
KR25-1123	THORACIC DUCT EMBOLIZATION	51160	63940	76730
KR25-1124	THORACIC ENDOVASCULAR AORTIC ANEURYSM REPAIR (TEVAR)	95000	111760	134120
KR25-1125	TRANSJUGULAR INTRAHEPATIC PORTOSYSTEMIC SHUNT (TIPS)	93710	110110	132130
KR25-1126	TRANSJUGULAR LIVER BIOPSY	43280	50860	61030
KR25-1127	UTERINE ARTERY EMBOLIZATION	49550	58300	69950
KR25-1128	VARICOCELE EMBOLIZATION	49550	58300	69950
KR25-1129	VARICOSE VEIN ABLATION - UNILATERAL	44100	51880	62250
KR25-1130	VENA-SEAL FOR VARICOSE VEINS (U/L)	47250	55590	66710

Note: OT Charge/Cathlab Charge/Consumables/Implants/Stay and Investigation charges Extra

USG/CT GUIDED PROCEDURES

KR25-1131	BEDSIDE SCREENING COLOR DOPPLER	1650	1940	2330
KR25-1132	CT GUIDED DIAGNOSTIC/ ASPIRATION	7550	8880	10660
KR25-1133	CT GUIDED FNAC/BIOPSY	13620	16040	19260
KR25-1134	CT GUIDED INTERVENTION & PROCEDURE	9520	11200	13460
KR25-1135	CT GUIDED TRUECUT BIOPSY	9920	11680	14020
KR25-1136	CT GUIDED TUMOR ABLATION CHEMICAL	13230	15570	18680
KR25-1137	CT PIGTAIL CATHETER DRAINAGE (Cost of Catheter Separate)	10790	12720	15260
KR25-1138	ULTRASOUND GUIDED	3850	4550	5450
KR25-1139	ULTRASOUND TRUS GUIDED PROSTATIC BIOPSY	13330	15160	18190
KR25-1140	USG GUIDED COMPRESSION OF FEMORAL PSEUDOANEURYSM	8820	10370	12440
KR25-1141	USG GUIDED DIAGNOSTIC PLEURAL/ PERITONEAL TAP	5400	6340	7620
KR25-1142	USG GUIDED DIAGNOSTIC PLEURAL/PERITONEAL TAP (PORTABLE)	6390	7500	8990
KR25-1143	USG GUIDED FOR IUCD INSERTION	3170	3740	4480
KR25-1144	USG GUIDED INTERVENTIONAL PROCEDURE	6310	7410	8880
KR25-1145	USG GUIDED THERAPEUTIC PLEURAL/ PERITONEAL ASPIRATION	8390	9900	11860
KR25-1146	USG GUIDED THERAPEUTIC PLEURAL/PERITONEAL ASPIRATION (PORTABLE)	9370	11020	13230
KR25-1147	USG GUIDED TRUECUT BIOPSY	8380	9860	11830
KR25-1148	USG GUIDED TUMOR ABLATION CHEMICAL	11570	13620	16340
KR25-1149	USG PIGTAIL CATHETER DRAINAGE (Cost of Catheter Separate)	10790	12720	15260

FETAL MEDICINE

KR25-1150	AMNIO DRAINAGE	7940	9340	11200
KR25-1151	AMNIOCENTESIS	8840	10410	12480

RADIODIAGNOSIS & IMAGING

Test Code	Test Name	IPD Charges OPD/Economy	Semi Pvt	Pvt
KR25-1152	AMNIOREDUCTION /AMNIOINFUSION	5550	6540	7850
KR25-1153	CHORIONIC VILLUS SAMPLING-SINGLE PREGNANCY	9350	11020	13210
KR25-1154	CHORIONIC VILLUS SAMPLING-TWIN PREGNANCY	10790	12690	15230
KR25-1155	FETAL BLOOD SAMPLING	14740	17330	20810
KR25-1156	FETAL ECHOCARDIGRAPHY-SINGLE PREGNANCY	4870	5730	6880
KR25-1157	FETAL ECHOCARDIGRAPHY-TWIN PREGNANCY	6800	8000	9600
KR25-1158	FETAL REDUCTION	18710	22010	26410
KR25-1159	FETAL VESICOCENTESIS (2 PART PROCEDURE)	9980	11740	14080
KR25-1160	INTRAUTERINE TRANSFUSION	22110	26020	31220
KR25-1161	SHUNT PROCEDURES	24290	28580	34280
KR25-1162	TRANSABDOMINAL INTRA-SAC INSTILLATION OF MTX & KCL	10800	12700	15250
KR25-1163	ULTRASOUND ANOMALY SCAN (LEVEL II) -SINGLE PREGNANCY	4750	5590	6710
KR25-1164	ULTRASOUND ANOMALY SCAN (LEVEL II) -TRIPLET PREGNANCY	12960	15250	18290
KR25-1165	ULTRASOUND ANOMALY SCAN (LEVEL II) -TWIN PREGNANCY	7020	8260	9910
KR25-1166	ULTRASOUND CERVICAL SCREENING (TVS)	850	850	850
KR25-1167	ULTRASOUND DOPPLER STUDY ALONE-SINGLE PREGNANCY	3170	3170	3170
KR25-1168	ULTRASOUND DOPPLER STUDY ALONE-TRIPLET PREGNANCY	5900	5900	5900
KR25-1169	ULTRASOUND DOPPLER STUDY ALONE-TWIN PREGNANCY	4320	4320	4320
KR25-1170	ULTRASOUND EARLY ANOMALY SCAN (SINGLE)	4100	4830	5800
KR25-1171	ULTRASOUND EARLY ANOMALY SCAN (TRIPLET)	8640	10160	12190
KR25-1172	ULTRASOUND EARLY ANOMALY SCAN (TWIN)	5670	6660	8000
KR25-1173	ULTRASOUND EARLY GROWTH SCAN	2000	2350	2820
KR25-1174	ULTRASOUND EARLY PREGNANCY (FETAL)	2040	2410	2880
KR25-1175	ULTRASOUND FETAL NEUROSONOGRAPHY (FETAL MEDICINE)	4750	5590	6710
KR25-1176	ULTRASOUND FETAL PRESENTATION (FETAL MEDICINE)	560	670	810
KR25-1177	ULTRASOUND FOR AFI (FETAL MEDICINE)	560	670	810
KR25-1178	ULTRASOUND FOR SCAR THICKNESS (FETAL MEDICINE)	680	810	960
KR25-1179	ULTRASOUND GROWTH SCAN (FETAL WELL BEING) -SINGLE BABY	4050	4760	5710
KR25-1180	ULTRASOUND GROWTH SCAN (FETAL WELL BEING) -TRIPLET PREGNANCY	9070	9070	9070
KR25-1181	ULTRASOUND GROWTH SCAN (FETAL WELL BEING) -TWIN PREGNANCY	5980	5980	5980
KR25-1182	ULTRASOUND MCA PSV (FETAL MEDICINE)	560	670	810
KR25-1183	ULTRASOUND NASAL BONE REASSESSMENT	850	850	850
KR25-1184	ULTRASOUND NT/NB SCAN - SINGLE PREGNANCY	3960	4680	5600
KR25-1185	ULTRASOUND NT/NB SCAN - TRIPLET PREGNANCY	9070	10670	12800
KR25-1186	ULTRASOUND NT/NB SCAN - TWIN PREGNANCY	6000	7070	8480
KR25-1187	ULTRASOUND TARGET	2270	2680	3210

CARDIOLOGY

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
PROCEDURE-CONSULTANT CHARGES FOR VARIOUS PACKAGES				
KC25-0001	A.I.C.D. Implantation	73590	91982	110380
KC25-0002	ATHERECTOMY (ROTABLATION CONSUMABLE, BURR, ADVANCER ROTAWIRE EXTRA)	40970	51210	61450
KC25-0003	BALLOON VALVULOPLASTY	80000	100000	120000
KC25-0004	COMBO DEVICE / CRT-D IMPLANTATION	103180	128980	154780
KC25-0005	DEVICE EXPLANTATION (Procedure Package Only)	48000	60000	72000
KC25-0006	FRACTIONAL FLOW RESERVE (FFR)	46200	51970	60640
KC25-0007	I.A.B.P. (COST OF BALLOON EXTRA)	25200	31500	37800
KC25-0008	IVC FILTER PLACEMENT (CARDIOLOGY)	49890	62360	74830
KC25-0009	IVUS GUIDED ANGIOPLASTY / DIAGNOSTIC IVUS	35280	44100	52920
KC25-0010	OCT GUIDED ANGIOPLASTY	40320	50400	60480
KC25-0011	PACEMAKER REPLACEMENT (PG)	66530	83160	99790
KC25-0012	PERCUTANEOUS FEMORAL ARTERY CLOSURE DEVICE (Inclusive Cost of Device) - Proglide	21780	21780	21780
KC25-0013	PERMANENT PACEMAKER-DUAL CHAMBER	102850	114950	127050
KC25-0014	PERMANENT PACEMAKER-SINGLE CHAMBER	62140	77680	93220
KC25-0015	TEMPORARY PACING (As Adjunet Procedure)	17420	21780	26140

: Cost of device/ IVUS Catheter will be charged extra as per actual cost.
: The above cost includes pre-anaesthetic check-up, two ECGs, Three X-rays of Chest & programming of the Pacemaker.

: The above cost does not include room charges, nursing care, RMO charges, drugs & medicines which shall be charged as per Hospital tariff or as per actual cost as the case may be. SrNo KC25-0013, KC25-0014 Two Days stay include in package.

PACKAGE CHARGES

KC25-0016	CORONARY ANGIOGRAPHY/RIGHT-LEFT HEART CATHETERISATION	15480	19350	23210

: The Package includes upto one night stay in the appropriate category of wards, CCU as required, ECG, routine lab tests, routine drugs, cost of consumables and consultant fee.
: This does not include the cost of non-ionic dye (which shall be charged as per the actual cost), cost of antibiotics and cost of any Special test.

KC25-0017	ELECTROPHYSIOLOGY (DIAGNOSTIC)	20050	20050	20050
KC25-0018	R.F. ABLATION	85000	85000	85000
KC25-0019	CAROTID ANGIOGRAPHY	19668	19668	19668
KC25-0020	PERIPHERAL ANGIOGRAPHY	14560	14560	14560
KC25-0021	PERIPHERAL ANGIOPLASTY	100050	125060	150070
KC25-0022	RENAL ANGIOGRAPHY	13230	13230	13230
KC25-0023	RENAL ANGIOPLASTY	86620	108280	129940

: The Package includes ECG, routine lab tests, routine drugs, cost of consumables and consultant fee.
: Additional charges for accomodation as per hospital tariff and cost of DSA Extra.

KC25-0024	AORTIC STENT GRAFTING	183060	202120	229260
KC25-0025	BIFURCATION CORONARY ANGIOPLASTY	237680	279510	335410
KC25-0026	CAROTID ANGIOPLASTY	176780	215230	238270
KC25-0027	CORONARY ANGIOPLASTY FOR CHRONIC TOTAL OCCLUSION	241370	280640	334470
KC25-0028	CORONARY ANGIOPLASTY USING ROTABLATION	225990	282490	338990
KC25-0029	LEFT MAIN CORONARY ANGIOPLASTY	292270	333500	389290
KC25-0030	MULTI VESSEL ANGIOPLASTY (2-3 AND MORE)	226310	282890	339470
KC25-0031	PERCUTANEOUS AORTIC VALVE REPLACEMENT (TAVR / TMVR / TPVR)	309300	324540	366470
KC25-0032	PRIMARY ANGIOPLASTY	219160	257830	309400
KC25-0033	SINGLE VESSEL ANGIOPLASTY	162620	203280	243940

: The Package includes upto three days stay in the appropriate category of ward, CCU as required, ECG, routine lab tests, routine drugs, cost of consumables, cost of one angioplasty balloon, X-ray and consultant fee.
: This does not include the cost of stents/special devices such as Rotablation / Atherectomy (which when used shall be charged as per actual cost), cost of using IABP, cost of special antibiotics GP IIb / IIIa antagonists and cost of special tests.
: Thrombosuction catheter, Inj. Reopro & PA Catheter, T Pacemaker Lead to be charged as per actual
: Use of more than one balloon/Guiding catheter and guidewires will be charged extra

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
	: Cost of Advancer, Burr and rota guide wire as per actual			
KC25-0034	FEMORAL/ BRACHIAL ARTERIAL EMBOLECTOMY	82830	103540	124250
KC25-0035	VALVULOPLASTY/DEVICE CLOSURE FOR CARDIAC DEFECTS (ASD, PDA, FISTULAS ETC.)	80260	100330	120400
KC25-0036	LIGATION OF ARTERIO VENOUS FISTULA	49300	61620	73940
KC25-0037	LIGATION OF ARTERIO VENOUS FISULA/ MALFORMATION	39140	48920	58700
	: The Package includes upto three days stay in the appropriate category of ward, CCU as required, ECG, routine lab tests, routine drugs, cost of consumables, X-ray and consultant fee.			
	: This does not include the cost of special devices (which will be charged as per actual cost), cost of using IABP, cost of special antibiotics and cost of any special tests.			
KC25-0038	CHECK ANGIO	12120	12120	12120
KC25-0039	FAILED PTCA (COST OF CONSUMABLE AS PER ACTUALS)	41580	51980	62380
KC25-0040	PRE-CLOSE	as per actuals		
KC25-0041	STAGED PTCA	50820	63530	76240

Note: 10% Extra Charges for the procedure for Carotid/Peripheral/Renal Angioplasty performed in association with coronary angioplasty

CARDIO-THORACIC & VASCULAR SURGERY

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KC25-0042	INJ. SCLEROTHERAPY - MAJOR (LEG)	4620	5250	6090
KC25-0043	INJ. SCLEROTHERAPY - MINOR (LEG)	3360	3940	4520
OPEN HEART SURGERY				
KC25-0044	OPEN HEART SURGERY- AORTIC VALVE REPLACEMENT	250000	275000	325000
KC25-0045	OPEN HEART SURGERY- CORONARY ARTERY BY-PASS GRAFT	275000	300000	325000
KC25-0046	OPEN HEART SURGERY- DOUBLE VALVE REPLACEMENT (DVR)	300000	325000	350000
KC25-0047	OPEN HEART SURGERY- LEFT ATRIAL MYXOMA (LA-MYXOMA)	250000	275000	300000
KC25-0048	OPEN HEART SURGERY- MITRAL VALVE REPLACEMENT	250000	275000	320000
KC25-0049	OPEN HEART SURGERY- REPAIR OF CARDIAC INJURY	275000	325000	375000
KC25-0050	OPEN HEART SURGERY- REPAIR OF VENTRICULAR SEPTAL RUPTURE	275000	300000	325000
KC25-0051	OPEN HEART SURGERY- RUPTURED SINUS OF VALSALVA (RSOV) REPAIR	275000	300000	325000
KC25-0052	OPEN HEART SURGERY- TRICUSPID VALVE REPAIR	265000	285000	330750
	: The Package includes upto 5 days stay in appropriate category of ward including 1-2 days in CTVS-ICU.			
CLOSED HEART SURGERY (ADULT)				
KC25-0053	CLOSED HEART SURGERY (ADULT)- AORTO FEMORAL BYPASS	200000	225000	250000
KC25-0054	CLOSED HEART SURGERY (ADULT) -COARCTATION REPAIR	200000	225000	250000
KC25-0055	CLOSED HEART SURGERY (ADULT)- MEDIASTINAL TUMOR	200000	225000	250000
	: The Package includes upto 5 days stay in appropriate category of ward including 1-2 days in CTVS-ICU.			
PAEDIATRIC CARDIAC SURGERY				
KC25-0056	PAEDIATRIC CARDIAC SURGERY- CLOSED MITRAL VALVOTOMY	150000	175000	180000
KC25-0057	PAEDIATRIC CARDIAC SURGERY-PDA LIGATION	110000	125000	150000
	: The package includes upto 3 days stay in hospital ICU and appropriate category of ward.			
KC25-0058	PAEDIATRIC CARDIAC SURGERY-B.D. GLENN (WITHOUT BY-PASS)	150000	175000	200000
	: The package includes upto 5 days stay in hospital ICU and appropriate category of ward.			
KC25-0059	PAEDIATRIC CARDIAC SURGERY-ATRIAL SEPTAL DEFECT (ASD) CLOSURE	185000	210000	275000
KC25-0060	PAEDIATRIC CARDIAC SURGERY-BD GLENN ON BYPASS	175000	200000	225000
KC25-0061	PAEDIATRIC CARDIAC SURGERY-BLALOCK-TAUSSIG (BT) SHUNT	155000	175000	200000
KC25-0062	PAEDIATRIC CARDIAC SURGERY-BT SHUNT ON BY-PASS	175000	200000	225000
KC25-0063	PAEDIATRIC CARDIAC SURGERY-COARCTATION REPAIR	180000	200000	225000
	: The package includes upto 7 days stay in hospital ICU and appropriate category of ward.			
KC25-0064	PAEDIATRIC CARDIAC SURGERY- TETRALOGY OF FALLOT (TOF)	250000	275000	300000
KC25-0065	PAEDIATRIC CARDIAC SURGERY- VENTRICULAR SEPTAL DEFECT (VSD) CLOSURE	250000	275000	300000
KC25-0066	PAEDIATRIC CARDIAC SURGERY-AORTIC VALVE REPAIR	205000	240000	280000
KC25-0067	PAEDIATRIC CARDIAC SURGERY-DOUBLE OUTLET RIGHT VENTRICLE (DORV) REPAIR	250000	275000	300000
KC25-0068	PAEDIATRIC CARDIAC SURGERY-MITRAL VALVE REPAIR	240000	260000	290000
KC25-0069	PAEDIATRIC CARDIAC SURGERY-RESECTION OF SUB-AORTIC MEMBRANE	250000	275000	300000
KC25-0070	PAEDIATRIC CARDIAC SURGERY-SENNING OPERATION	250000	275000	300000
KC25-0071	PAEDIATRIC CARDIAC SURGERY-TOTAL ANOMALOUS PULMONARY VENOUS CONNECTION (TAPVC)	250000	275000	300000
	: The package includes upto 7-10 days stay in hospital ICU and appropriate category of ward.			
KC25-0072	PAEDIATRIC CARDIAC SURGERY- ATRIOVENTRICULAR CANAL REPAIR	250000	275000	331690
KC25-0073	PAEDIATRIC CARDIAC SURGERY- REV OPERATION	250000	290220	348270
KC25-0074	PAEDIATRIC CARDIAC SURGERY- TOTAL CAVOPULMONARY CONNECTION (TCPC)	260000	300000	348270
KC25-0075	PAEDIATRIC CARDIAC SURGERY-ARTERIAL SWITCH	275000	300000	348270
KC25-0076	PAEDIATRIC CARDIAC SURGERY-FONTAN PROCEDURE	275000	300000	348270
	: The package includes upto 12 days stay in hospital ICU and appropriate category of ward.			
KC25-0077	PAEDIATRIC CARDIAC SURGERY-TRICUSPID VALVE REPAIR	225000	250000	280780
KC25-0078	PAEDIATRIC CARDIAC SURGERY-TRICUSPID VALVE REPLACEMENT	250000	275000	300000
	: The package includes upto 10 days stay in hospital ICU and appropriate category of ward.			

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
CHARGES IN ADDITION TO PACKAGE				
	The following additional charges will be levied in the following stated condition over the standard package rate .			
KC25-0079	AORTIC REPAIR	250000	275000	300000
KC25-0080	CAROTID SURGERY ON ONE VESSEL	100000	125000	150000
KC25-0081	CORONARY ARTERY REPAIR	250000	275000	300000
KC25-0082	DOUBLE VALVE REPLACEMENT (ALONG WITH CABG)	150000	175000	200000
KC25-0083	EMERGENCY SURGERY	60000	70000	80000
KC25-0084	FOR DIABETIC PATIENTS (For 5 Days Post Operative)	25000	30000	40000
KC25-0085	HIGH RISK CASES (eg. Poor LVEF <35% Age >75, COPD)	40000	50000	60000
KC25-0086	LAA CLOT EXTRACTION	25000	30000	40000
KC25-0087	LAA LIGATION	25000	30000	40000
KC25-0088	RE-DO CASES	100000	125000	150000
KC25-0089	RE-EXPLORATION FOR MEDIASTINAL BLEEDING/COLLECTION	20050	24250	30310
KC25-0090	RESUTURING	20000	22050	27560
KC25-0091	SINGLE VALVE REPLACEMENT (ALONG WITH CABG)	85000	110000	135000
KC25-0092	TEE INTRAOPERATIVE TRANSESOPHAGEAL ECHO CARDIOGRAPHY	10000	12500	15000
OTHER CHARGES (IF APPLICABLE)				
KC25-0093	BIOGLUE (AS PER ACTUAL)	as per actuals		
KC25-0094	BLOOD CELL SAVER	22660	27780	33620
KC25-0095	CENTRIFUGAL PUMP	22870	28110	33070
KC25-0096	CHEST BINDER	as per actuals		
KC25-0097	CONSULATION FEE FOR ALL CROSS CONSULTATIONS(OTHER THAN FOR CARDIOLOGIST,CTVS SURGEEON AND CARDIAC ANESTHETIST)	as per hospital tariff		
KC25-0098	COST OF ECHO, STRESS, HOLTER, PFT, CAROTID DOPPLER, TEE & OTHER TESTS, WHEN REQUIRED, EITHER PRE-OPERATIVE OR POST-OPERATIVE	as per hospital tariff		
KC25-0099	COST OF GLUE /TISSEAL/ FIBRIN POWDER	as per actuals		
KC25-0100	COST OF IABP BALLOON (As per actuals)	as per actuals		
KC25-0101	COST OF SPECIAL SUTURES	as per actuals		
KC25-0102	DACRON/TEFLON/PTPEPATCH	as per actuals		
KC25-0103	DOBUTAMINE INJECTION	as per actuals		
KC25-0104	ELASTIC COMPRESSION STOCKINGS	as per actuals		
KC25-0105	EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) - Consumable as per actual	55120	55120	55120
KC25-0106	FACTOR VII A	as per actuals		
KC25-0107	I.V. NUTRITION	as per actuals		
KC25-0108	INJECTION ALBUMIN	as per actuals		
KC25-0109	PERICARDIECTOMY (Along with any other Open Heart Surgery)	70000	80000	90000
KC25-0110	STAY FOR ADDITIONAL NO. OF DAYS	as per hospital tariff		
KC25-0111	SWAN GANZ CATHETER (as per actual)	as per actuals		
THORACIC SURGERY				
KC25-0112	EXCISION & REPAIR OF EMPHYSEMATOUS BULLAE (UNILATERAL)	148530	157170	170270
KC25-0113	EXCISION & REPLACEMENT OF OESOPHAGUS	248850	268500	281600
KC25-0114	EXCISION OF HYDATID CYST-LUNG	158760	198450	238140
KC25-0115	OESOPHAGEAL SURGERY	190510	238140	285770
KC25-0116	THORACIC SURGERY- CHEST WALL RESECTION	178600	208960	238140
KC25-0117	THORACIC SURGERY- DECORTICATION	208380	238140	267910
KC25-0118	THORACIC SURGERY- EMPYEMA DRAINAGE (TUBE) - Only for Procedure Charges	26750	31550	38100
KC25-0119	THORACIC SURGERY- EMPYMECTOMY	168750	189270	216270
KC25-0120	THORACIC SURGERY-REPAIR OF FRACTURE RIB WITH PLATE / WIRE	150000	175000	200000

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
	: The Package includes upto 6-7 days stay in appropriate category of ward including 1-2 days in CTVS-ICU(SAME AS OPEN HEART SURGERY PACKAGE).			
KC25-0121	THORACIC SURGERY- EXCISION OF STERNUM & / OR COSTOCHONDRAL JUNCTION	180990	197560	222790
KC25-0122	THORACIC SURGERY- PERICARDIECTOMY BY LEFT THORACOTOMY	200000	220000	250000
KC25-0123	THORACIC SURGERY- PERICARDIECTOMY BY STERNOTOMY	215000	275000	250000
KC25-0124	THORACIC SURGERY- PNEUMONECTOMY	294690	323710	364650
KC25-0125	THORACIC SURGERY- REPAIR OF CHEST INJURY (MAJOR)	200000	225000	250000
KC25-0126	THORACIC SURGERY- REPAIR OF DIAPHRAGMATIC EVENTRATION	194090	212840	255400
KC25-0127	THORACIC SURGERY- REPAIR OF INTERNAL INJURY (CHEST/LUNG)	189270	205470	226800
KC25-0128	THORACIC SURGERY- THORACOPLASTY	204800	225000	250000
KC25-0129	THORACIC SURGERY- THYMECTOMY - SUBTOTAL	178600	202410	226230
KC25-0130	THORACIC SURGERY- THYMECTOMY - TOTAL	200000	214330	238140
	: The Package includes upto 5 days stay in appropriate category of ward including 1-2 days in CTVS-ICU(SAME AS OPEN HEART SURGERY PACKAGE).			
KC25-0131	THORACIC SURGERY- FULL THORACOTOMY	179800	190510	208380
KC25-0132	THORACIC SURGERY- LIMITED THORACTOMY (SMALL)	85130	92840	111390
KC25-0133	THORACIC SURGERY- LUNG BIOPSY	68760	85960	103140
KC25-0134	THORACIC SURGERY- LUNG RESECTION	200000	215000	225000
KC25-0135	THORACIC SURGERY- REPAIR OF CHEST WALL (MAJOR)	55010	68760	82510
KC25-0136	THORACIC SURGERY- REPAIR OF LUNG (MAJOR)	50940	63670	76400
KC25-0137	THORACIC SURGERY- VIDEO-ASSISTED THORACOSCOPIC SURGERY (VATS)	80680	89530	115040
	: (2 Days Stay Package)			
KC25-0138	THORACIC SURGERY- ELOESSER FLAP	85130	98230	117880
KC25-0139	THORACIC SURGERY- EMPYEMA DRAINAGE (OPEN)	160750	172650	188720
KC25-0140	THORACIC SURGERY- REPAIR OF ASSOCIATED LUNG INJURY	154790	172650	190510
	: (3 Days Stay Package)			
	SURGERY OF THE AORTA			
KC25-0141	SURGERY OF THE AORTA TOTAL AORTIC ARCH REPLACEMENT/REPAIR	400000	450000	500000
KC25-0142	SURGERY OF THE AORTA-ASCENDING AORTIC REPLACEMENT	300000	325000	350000
KC25-0143	SURGERY OF THE AORTA-BENTALL OPERATION WITH COMPOSITE VALVE GRAFT	300000	325000	350000
KC25-0144	SURGERY OF THE AORTA-HEMIARCH AORTIC REPAIR	325000	350000	375000
KC25-0145	SURGERY OF THE DESENDING THORACIC AORTA ANEURYSM OPEN REPAIR	300000	325000	350000
	: The Package includes upto 7 days stay in appropriate category of ward including 1-2 days in CTVS-ICU(SAME AS OPEN HEART SURGERY PACKAGE).			
KC25-0146	SURGERY OF THE DESENDING ABDOMINAL AORTIC ANEURYSM OPEN REPAIR	250000	275000	300000
	: The Package includes upto 5 days stay in appropriate category of ward including 1-2 days in CTVS-ICU(SAME AS OPEN HEART SURGERY PACKAGE).			
	VASCULAR SURGERY			
KC25-0147	VASCULAR SURGERY- VARICOSE VEIN LIGATION & STRIPPING	100000	120000	140000
KC25-0148	VASCULAR SURGERY-RADIOFREQUENCY ABLATION/LASER FOR VARICOSE VEIN (Cost of Graft is extra)	150000	175000	200000
	: (1-2 Days Stay Package)			
KC25-0149	VASCULAR SURGERY- ASCENDING AORTA TO 1 FEMORAL BYPASS	200000	250000	252470
KC25-0150	VASCULAR SURGERY- ASCENDING AORTA TO BI FEMORAL BYPASS	225000	250000	300000
KC25-0151	VASCULAR SURGERY- AXILLO AXILLARY ARTERIAL BYPASS (Cost of Graft is extra)	130000	150000	175000
KC25-0152	VASCULAR SURGERY- AXILLO BIFEM ARTERIAL BYPASS	225000	250000	275000
KC25-0153	VASCULAR SURGERY- AXILLO BRACHIAL ARTERIAL BYPASS (Cost of Graft is extra)	125500	146000	157500
KC25-0154	VASCULAR SURGERY- AXILLO FEMORAL BYPASS (COST OF GRAFT IS EXTRA)	175000	193920	227420
KC25-0155	VASCULAR SURGERY- BILATERAL FEM POP ARTERIAL BYPASS	220260	245010	280770
KC25-0156	VASCULAR SURGERY- CAROTID ARTERY REPAIR OR ENDARTERECTOMY WITH VEIN PATCH	100000	125000	150000

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KC25-0157	VASCULAR SURGERY- CAROTID ARTERY REPAIR WITH PTFE PATCH	100000	125000	150000
KC25-0158	VASCULAR SURGERY- EMBOLECTOMY- BRACHIAL	75000	80000	100000
KC25-0159	VASCULAR SURGERY- EMBOLECTOMY-FEMORAL	85000	100000	125000
KC25-0160	VASCULAR SURGERY- FEM/BRACHIAL ARTERIAL REPAIR/EMBOLECTOMY	85000	100000	125000
KC25-0161	VASCULAR SURGERY-CROSS-OVER FEM-FEM BYPASS (COST OF GRAFT IS EXTRA)	125000	150000	175000
KC25-0162	VASCULAR SURGERY-EXPLANTATION (PROCEDURE)	30000	40000	50000
KC25-0163	VASCULAR SURGERY-EXPLANTATION OF ONE GRAFT	50000	60000	75000
KC25-0164	VASCULAR SURGERY-EXPLANTATION OF TWO GRAFTS	60000	75000	90000
KC25-0165	VASCULAR SURGERY-FEM POP A BYPASS (COST OF GRAFT IS EXTRA)	125000	150000	175000
KC25-0166	VASCULAR SURGERY-FEMOROTIBIAL ARTERIAL BYPASS	135000	165000	185000
	: (2-3 Days Stay Package)			
KC25-0167	CATHETER DIRECTED FOAM SCLEROTHERAPY (CDFS) OF GSV + BELOW KNEE USG GUIDED FOAM SCLEROTHERAPY (UGFS)	38590	44100	49610
KC25-0168	RADIO FREQUENCY ABLATION (RFA) / LASER OF GSV/SSV (EXCLUDING FIBRE) + USG GUIDED FOAM SCLEROTHERAPY (UGFS)	125000	150000	160000
KC25-0169	USG GUIDED FOAM SCLEROTHERAPY (UGFS)	25000	30000	35000
KC25-0170	VASCULAR SURGERY- ARTERIAL REPAIR (END TO END WITH VEIN)	160000	175000	200000
KC25-0171	VASCULAR SURGERY- ARTERIAL REPAIR (GRAFT)	175000	190000	200000
KC25-0172	VASCULAR SURGERY- ENDOVASCULAR ARTERIAL REPAIR (TEVAR) - Cost of Graft Extra	200000	225000	250000
KC25-0173	VASCULAR SURGERY- FEMORAL PSEUDOANEURYSM (SIZE < 5 CM)	100000	125000	150000
KC25-0174	VASCULAR SURGERY- FEMORAL PSEUDOANEURYSM (SIZE > 5 CM)	125000	150000	175000
KC25-0175	VASCULAR SURGERY- LASER (EXCL COST OF LASER) GSV	125000	150000	170000
KC25-0176	VASCULAR SURGERY- LIGATION AND STRIPPING OF GSV	100000	125000	150000
KC25-0177	VASCULAR SURGERY- LIGATION AND STRIPPING OF SSV	85000	95000	100000
KC25-0178	VASCULAR SURGERY- SCLEROTHERAPY	12000	15000	20000
KC25-0179	VASCULAR SURGERY- VENASEAL FOR VV (Excl. Venaseal cost extra)	130000	150000	170000
KC25-0180	VASCULAR SURGERY- VENOUS THROMBECTOMY-LOWER LIMB	120000	130000	140000
KC25-0181	VASCULAR SURGERY- VENOUS THROMBECTOMY-UPPER LIMB	110250	126790	138910
KC25-0182	VASCULAR SURGERY-A V MALFORMATION EXCISION (LARGE)	100000	125000	145000
KC25-0183	VASCULAR SURGERY-A V MALFORMATION EXCISION (SMALL)	65000	75000	85000
KC25-0184	VASCULAR SURGERY-ARTERIAL REPAIR (DIRECT)	90000	100000	120000
KC25-0185	VASCULAR SURGERY-RFA for GSV (Excl. cost of RFA extra)	125000	150000	160000
	: (3 Days Stay Package)			
KC25-0186	VASCULAR SURGERY- PULMONARY ARTERIAL THROMBECTOMY	259090	275770	330930
KC25-0187	VASCULAR SURGERY- THORACIC ENDOVASCULAR AORTIC REPAIR (TEVAR) (Cost of Graft is Extra)	300000	325000	375000

: The Package includes upto 3-4 days stay in appropriate category of ward including 1-2 days in CTVS-ICU(SAME AS OPEN HEART SURGERY PACKAGE).

DENTAL

CODE	DESCRIPTION	CHARGES
GENERAL		
KS25-0001	DENTAL X RAY	270
KS25-0002	EXTRACTION DECIDUOUS TOOTH	640
KS25-0003	EXTRACTION EACH TOOTH	1010
KS25-0004	STUDY IMPRESSION (U/L)	250
KS25-0005	SURGICAL EXTRACTION GRADE I	1690
KS25-0006	SURGICAL EXTRACTION GRADE II	2540
KS25-0007	SURGICAL EXTRACTION GRADE III	3830
KS25-0008	SURGICAL EXTRACTION OF ROOT CANAL TREATED TOOTH	5070
CONSERVATIVE / RESTORATIVE TREATMENT		
KS25-0009	BLEACHING EXTENSIVE	16440
KS25-0010	BLEACHING MEDIUM	12780
KS25-0011	COMPLETE TOOTH BUILDUP COMPOSITE/MIRACLE / GIC	4520
KS25-0012	COMPOSITE VENEERS (PROSTHODONTIC)	8000
KS25-0013	CUSP GRINDING PER SEGMENT (UPTO 4 TEETH)	550
KS25-0014	DE-SENSITISATION	1680
KS25-0015	FIBRE SPLINT PER TOOTH (MAXILLOFACIAL)	1530
KS25-0016	FILLING ALLOY EXTENSIVE	2030
KS25-0017	FILLING ALLOY SIMPLE	1530
KS25-0018	FILLING CEMENT - EXTENSIVE	1900
KS25-0019	FILLING CEMENT - MEDIUM	1530
KS25-0020	FILLING CEMENT SIMPLE	890
KS25-0021	FILLING RESIN EXTENSIVE	2540
KS25-0022	FILLING RESIN SIMPLE	1900
KS25-0023	FLUORIDATION PER SEGMENT	1840
KS25-0024	LAMINATION PER TOOTH	2290
KS25-0025	MTA APPLICATION	2600
KS25-0026	PERFORATION REPAIR WITH MTA (RESTORATIVE)	7000
KS25-0027	PIT FISSURE SEALANTS PER TOOTH	1780
KS25-0028	POST-RCT RESTORATION	3180
KS25-0029	PULP CAPPING	1190
KS25-0030	PULPECTOMY	3310
KS25-0031	PULPOTOMY	2060
KS25-0032	RCT OF THIRD MOLAR/CALCIFIED TOOTH	8270
KS25-0033	RE ROOT CANAL TREATMENT ANTERIOR/POSTERIOR WITHOUT CROWN	8920
KS25-0034	ROOT CANAL TREATMENT WITHOUT CROWN	6100
KS25-0035	ROOT CANAL TREATMENT WITHOUT CROWN WITH ROTARY SYSTEM	7630
KS25-0036	ROTARY ENDODONTICS RCT WITHOUT CROWN	7630
KS25-0037	SINGLE SITTING ROOT CANAL	6300
KS25-0038	SPACE CLOSURE WITH BONDING (RESTORATIVE)	4440
KS25-0039	TEMPORARY FILLING	640
KS25-0040	TOOTH JEWELLERY (SINGLE DIAMOND PLACEMENT)	3500
KS25-0041	ZIRCONIA VENEERS (PROSTHODONTIC)	16550
PROSTHODONTIC TREATMENT		
KS25-0042	3M PORCELAIN CROWN	11260
KS25-0043	BPS RPD 1-3 TEETH (UPPER OR LOWER)	14770
KS25-0044	BPS RPD ADDITION EACH TOOTH	1530
KS25-0045	BPS RPD BILATERAL PLATE 1-3 TEETH (UPPER OR LOWER)	17390

DENTAL

CODE	DESCRIPTION	CHARGES
KS25-0046	BPS UPPER & LOWER COMPLETE DENTURE	45650
KS25-0047	BPS UPPER OR LOWER ONE EACH COMPLETE DENTURE	23010
KS25-0048	CAD-CAM W99 CERAMIC CROWN/BRIDGE PER UNIT	12460
KS25-0049	CAST PARTIAL DENTURE (1-3 TEETH UPDER OR LOWER)	24060
KS25-0050	CAST PARTIAL DENTURE (EACH ADDITONAL TOOTH OVER 3 TEETH)	1220
KS25-0051	CAST PARTIAL DENTURE ADDITION EACH TOOTH OVER 3 TEETH	1180
KS25-0052	CAST PARTIAL DENTURE BILATERAL 1-3 TEETH (UPPER OR LOWER)	23010
KS25-0053	CAST PARTIAL DENTURE UNILATERAL 1-3 TEETH (UPPER OR LOWER)	14380
KS25-0054	CERAMIC INLAY PER UNIT	6370
KS25-0055	CERAMIC VENEER PER UNIT	15920
KS25-0056	CLEANING OF OLD DENTURE (BOTH UPPER & LOWER EACH)	510
KS25-0057	CLEANING OF OLD DENTURE (SINGLE UPPER OR LOWER EACH)	250
KS25-0058	COMPLETE DENTURE 199 (BOTH UPPER & LOWER)	35400
KS25-0059	COMPLETE DENTURE 199 (SINGLE UPPER OR LOWER EACH)	17180
KS25-0060	COMPLETE DENTURE BPS (BOTH UPPER & LOWER)	47820
KS25-0061	COMPLETE DENTURE BPS (SINGLE UPPER OR LOWER EACH)	24060
KS25-0062	COMPLETE DENTURE LUCITONE (BOTH UPPER & LOWER)	25460
KS25-0063	COMPLETE DENTURE LUCITONE (SINGLE UPPER OR LOWER EACH)	12730
KS25-0064	CROWN LENGTHENING PER UNIT	2490
KS25-0065	DENTURE REPAIR	960
KS25-0066	EACH ABUTMENT IN OVER DENTURE	2670
KS25-0067	EACH ADDITIONAL TOOTH FLEXIBLE FOR EXISTING OLD DENTURE	6080
KS25-0068	EACH ADDITIONAL TOOTH LUCITRONE	740
KS25-0069	E-MAX ALL CERAM CROWN EACH UNIT	14380
KS25-0070	FLEXIBLE R.P.D. 1-3 TEETH LOWER	17410
KS25-0071	FLEXIBLE R.P.D. 1-3 TEETH UPPER	17410
KS25-0072	FLEXIBLE R.P.D. ADDITION EACH TOOTHOVER 3 TEETH	2740
KS25-0073	GINGIVA BUILD UP	2610
KS25-0074	IN-CERAM	14010
KS25-0075	INLAY	2910
KS25-0076	LAWA BASIC	15640
KS25-0077	LAWA CLASSIC	20870
KS25-0078	LAWA PREMIUM	26090
KS25-0079	METAL CROWN WITH PORCELAIN FACING	5380
KS25-0080	METAL FULL CLASSIC CROWN/ BRIDGE PER UNIT (10 yrs. Warranty)	21520
KS25-0081	METAL FULL CROWN/ BRIDGE PER UNIT (5 yrs. Warranty)	16360
KS25-0082	METAL FULL PREMIUM CROWN/ BRIDGE PER UNIT (15 yrs. Warranty)	26610
KS25-0083	OBTURATOR WITH BULB & WITHOUT TEETH 8000	10190
KS25-0084	OBTURATOR WITH BULB LESS TEETH	7360
KS25-0085	OBTURATOR WITHOUT BULB & WITHOUT TEETH 5000	6370
KS25-0086	OBTURATOR WITHOUT BULB LESS TEETH	6030
KS25-0087	OVER DENTURE SINGLE ARCH (UPPER OR LOWER) IN BPS	21390
KS25-0088	OVER DENTURE SINGLE ARCH (UPPER OR LOWER) IN IN199	16040
KS25-0089	OVER DENTURE SINGLE ARCH (UPPER OR LOWER) IN LUCITONE	10690
KS25-0090	OVERDENTURE ABUTMENT EACH	2800
KS25-0091	OVERDENTURE COMPLETE 199 (BOTH UPPER & LOWER)	35400
KS25-0092	OVERDENTURE COMPLETE BPS (BOTH UPPER & LOWER)	47820
KS25-0093	OVERDENTURE COMPLETE BPS (SINGLE UPPER OR LOWER EACH)	24060
KS25-0094	OVERDENTURE COMPLETE LUCITONE (BOTH UPPER & LOWER)	22910
KS25-0095	OVERDENTURE COMPLETE LUCITONE (SINGLE UPPER OR LOWER EACH)	11520

DENTAL

CODE	DESCRIPTION	CHARGES
KS25-0096	PARTIAL DENTURE 1-3 LUCITONE	3390
KS25-0097	PARTIAL DENTURE METAL	8230
KS25-0098	PFM CROWN/BRIDGE PER UNIT	8520
KS25-0099	PORCELAIN CROWN EACH UNIT (PFM) CAP	8150
KS25-0100	PORCELAIN VEENER EACH TOOTH	15330
KS25-0101	POST & CORE	5350
KS25-0102	POST & CORE PER UNIT	5600
KS25-0103	PROCERA/LAVA/CERCON PORCELAIN CROWN	26090
KS25-0104	RE-CEMENTATION OF OLD CROWN/BRIDGE PER UNIT	1520
KS25-0105	RELINING OF COMPLETE DENTURE (SINGLE UPPER OR LOWER EACH)	3830
KS25-0106	RELINING OF FULL DENTURE	3660
KS25-0107	REMOVAL OF ACERYLIC FAULTY DENTURE	1920
KS25-0108	REMOVAL OF FIXED OLD CROWN PER TOOTH	1150
KS25-0109	REMOVAL OF OLD ACRYLIC FILLING	480
KS25-0110	REMOVAL OF OLD CROWN/ BRIDGE PER UNIT	1010
KS25-0111	REMOVAL OF OLD FAULTY FIXED ACRYLIC DENTURE	1900
KS25-0112	RPD (EACH ADDITIONAL TOOTH OVER 3 TEETH)	1200
KS25-0113	RPD 199 (1-3 TEETH UPPER OR LOWER)	11050
KS25-0114	RPD 199 (EACH ADDITIONAL TOOTH OVER 3 TEETH)	1140
KS25-0115	RPD BPS (1-3 TEETH UPDER OR LOWER)	15480
KS25-0116	RPD BPS (EACH ADDITONAL TOOTH OVER 3 TEETH)	1590
KS25-0117	RPD FLEXIBLE (1-3 TEETH UPDER OR LOWER)	18200
KS25-0118	RPD FLEXIBLE (EACH ADDITONAL TOOTH OVER 3 TEETH)	2870
KS25-0119	RPD LUCITONE (1-3 TEETH UPPER OR LOWER)	6370
KS25-0120	RPD LUCITONE (EACH ADDITIONAL TOOTH OVER 3 TEETH)	760
KS25-0121	SPLINT ACRYLIC EACH JAW	3640
KS25-0122	TEMPORARY CROWN PER UNIT	1010
KS25-0123	TISSUE CONDITIONING BOTH JAW	3750
KS25-0124	TISSUE CONDITIONING SINGLE JAW	1860
KS25-0125	UPPER & LOWER COMPLETE DENTURE IN - 199	33810
KS25-0126	UPPER & LOWER ONE EACH COMPLETE DENTURE IN -199	16440
KS25-0127	UPPER AND LOWER COMPLETE DENTURE IN LUCITRONE	21910
KS25-0128	UPPER OR LOWER ONE EACH COMPLETE DENTURE IN LUCITONE	11000
KS25-0129	W99 CROWN/BRIDGE PER UNIT	11330
KS25-0130	W99 PORCELAIN BRIDGE PER UNIT	11320
KS25-0131	W99 PORCELAIN CROWN	11000
KS25-0132	ZIRCONIA CROWN/ BRIDGE PER UNIT	17700
KS25-0133	ZIRCONIA PORCELAIN CROWN	17250

PERIODONTAL TREATMENT

KS25-0134	ABCESS DRAINAGE PER TOOTH	890
KS25-0135	CROWN LENGTHENING PER TOOTH	2240
KS25-0136	CURETTAGE PER SEGMENT	2930
KS25-0137	DEPIGMENTATION PER SEGMENT	3650
KS25-0138	FLAP SURGERY PER TOOTH WITH BONE GRAFT	4890
KS25-0139	FLAP SURGERY PERSEQMENT EXTENSIVE	7450
KS25-0140	FLAP SURGERY PERSEQMENT MEDIUM	4440
KS25-0141	FLAP SURGERY PERSEQMENT WITH BONE GRAFTING	9500
KS25-0142	FRENECTOMY	4580
KS25-0143	GINGIVECTOMY PER SEGMENT - EXTENSIVE	3530
KS25-0144	GINGIVECTOMY PER SEGMENT - MEDIUM	2820

DENTAL

CODE	DESCRIPTION	CHARGES
KS25-0145	GINGIVECTOMY PERSEQUMENT WITH BONE GRAFTING	6630
KS25-0146	ORAL PROPHYLAXIS (EXTENSIVE)	2470
KS25-0147	ORAL PROPHYLAXIS (MEDIUM)	2270
KS25-0148	ORAL PROPHYLAXIS (SUPRAFACIAL)	1590
KS25-0149	POLISHING OF TEETH	870
KS25-0150	RADIO SURGICAL REMOVAL OF PERICORONAL FLAP	2840
KS25-0151	ROOT COVERAGE FOR RECESSION (PER TOOTH)	3020
KS25-0152	ROOT PLANNING PER SEGMENT	2120

ORTHODONTIC TREATMENT

KS25-0153	ARCH WIRE LOWER	5500
KS25-0154	ARCH WIRE UPPER	5500
KS25-0155	BITE PLATE/HAWLEYS PLATE	6400
KS25-0156	DEBONDING BRACKETS	2750
KS25-0157	EXPANSION APPLIANCE	10960
KS25-0158	FIXED MECHANOTHERAPY WITH CERAMIC (3M)	89130
KS25-0159	FIXED MECHANOTHERAPY WITH METAL (3M)	76410
KS25-0160	FIXED MECHANOTHERAPY WITH SELF LIGATING CERAMIC	82760
KS25-0161	FIXED MECHANOTHERAPY WITH SELF LIGATING METAL	68760
KS25-0162	FIXED ORTHODONTIC TREATMENT FOR RETRACTION OF IMPACTED TOOTH WITH CERAMIC	82810
KS25-0163	FIXED ORTHODONTIC TREATMENT FOR RETRACTION OF IMPACTED TOOTH WITH METAL	74550
KS25-0164	FIXED ORTHODONTIC TREATMENT WITH CERAMIC	78280
KS25-0165	FIXED ORTHODONTIC TREATMENT WITH IMPLANT	78280
KS25-0166	FIXED ORTHODONTIC TREATMENT WITH METAL	60880
KS25-0167	GROWTH MODIFICATION CORRECTOR	13250
KS25-0168	HABIT BREAKING APPLIANCE	10450
KS25-0169	INVISALIGNERS SIMPLE	202120
KS25-0170	INVISIBLE RETAINER	3840
KS25-0171	INVISILIGNERS UPPER/LOWER BOTH ARCH	280150
KS25-0172	INVISILIGNERS UPPER/LOWER SINGLE ARCH	147070
KS25-0173	LINGUAL FIXED ORTHODONTIC TREATMENT	155220
KS25-0174	LINGUAL RETAINER	5360
KS25-0175	MULTI UNIT ABUTMENT	6000
KS25-0176	NIGHT GUARD	5330
KS25-0177	OBTURATOR PLATE	5500
KS25-0178	ONE ARCH TREATMENT WITH CERAMIC	39750
KS25-0179	ONE ARCH TREATMENT WITH METAL	31480
KS25-0180	ORTHODONTIC EXTRACTION PER TOOTH	1390
KS25-0181	REBONDING NEW BRACKET (PER BRACKET)	930
KS25-0182	RETAINER	1690
KS25-0183	SIMPLE RETAINER	2310

MAXILLO FACIAL SURGERY

KS25-0184	ABSCESS DRAINAGE (LARGE)	9280
KS25-0185	ABSCESS DRAINAGE (SMALL)	4320
KS25-0186	ABSCESS MGMT	10610
KS25-0187	ALVEOLECTOMY (PER SEGMENT)	1580
KS25-0188	ALVEOLOPLASTY FULL JAW	13630
KS25-0189	ALVEOLOPLASTY ONE SEGMENT	7430
KS25-0190	ANGLE MANDIBLE# ORIF	40100
KS25-0191	ANKYLOGLOSSIA CORRECTION	16100

DENTAL

CODE	DESCRIPTION	CHARGES
KS25-0192	APICOECTOMY PER TOOTH EXTENSIVE	4930
KS25-0193	APICOECTOMY PER TOOTH SMALL	3390
KS25-0194	APICOECTOMY/ABSCESS / FRACTURE DRESSING	730
KS25-0195	ARCH BAR REMOVAL	4080
KS25-0196	ARCHBAR PER ARCH	21230
KS25-0197	ARTHROSCOPY OF TMJ	13630
KS25-0198	B/L PANFACIAL# ORIF	129760
KS25-0199	B/L TMJ# ORIF	94370
KS25-0200	BICORONAL INCISION APPROACH FACIAL DEGLOVING	117970
KS25-0201	BIOPSY SMALL TUMOUR EXCISION - EXTENSIVE	13420
KS25-0202	BIOPSY SMALL TUMOUR EXCISION - MEDIUM	11180
KS25-0203	BIOPSY SMALL TUMOUR EXCISION - SMALL	8960
KS25-0204	BONE PLATE FIXATION -MAJOR	28420
KS25-0205	BONE PLATE FIXATION -MEDIUM	21310
KS25-0206	BONE PLATE FIXATION -MINOR	16000
KS25-0207	BSSO MANDIBLE COSMETIC CORRECTION	74320
KS25-0208	CLEFT LIP REPAIR - BILATERAL	30970
KS25-0209	CLEFT LIP REPAIR - UNILATERAL	26010
KS25-0210	CLEFT PALATE REPAIR - COMPLETE	30970
KS25-0211	CLEFT PALATE REPAIR - INCOMPLETE	27240
KS25-0212	CLOSED REDUCTION FRACTURE MANDIBLE-MAJOR	30770
KS25-0213	CLOSED REDUCTION FRACTURE MANDIBLE-MEDIUM	23950
KS25-0214	CLOSED REDUCTION FRACTURE MANDIBLE-MINOR	14360
KS25-0215	CLOSED REDUCTION FRACTURE MAXILLA-MAJOR	28740
KS25-0216	CLOSED REDUCTION FRACTURE MAXILLA-MEDIUM	20530
KS25-0217	CLOSED REDUCTION FRACTURE MAXILLA-MINOR	14360
KS25-0218	CLOSED REDUCTION ZYQOMATIC COMPLESE-MAJOR	24630
KS25-0219	CLOSED REDUCTION ZYQOMATIC COMPLESE-MEDIUM	16390
KS25-0220	CLOSED REDUCTION ZYQOMATIC COMPLESE-MINOR	10250
KS25-0221	COMPLEX INTRAORAL FACIAL LACERATION REPAIR	43360
KS25-0222	CONDYLAR FRACTURES (OPEN REDUCTION)	24520
KS25-0223	DEEP IMPACTED 3RD MOLAR	15000
KS25-0224	DEEP IMPACTED CANINE - BILATERAL	65000
KS25-0225	DEEP IMPACTED CANINE - UNILATERAL	35000
KS25-0226	DENTAL IMPLANT WITHOUT BONE GRAFTING CHARGES - MINOR	30770
KS25-0227	DENTAL IMPLANT WITHOUT BONE GRAFTING CHARGES-MAJOR	51280
KS25-0228	DENTAL IMPLANT WITHOUT BONE GRAFTING CHARGES-MEDIUM	41040
KS25-0229	DENTOALVCOLAN FRACTURE - MAJOR	14360
KS25-0230	DENTOALVCOLAN FRACTURE - MEDIUM	10250
KS25-0231	DENTOALVCOLAN FRACTURE - MINOR	6150
KS25-0232	DISLOCATION OF TMJ	4320
KS25-0233	DISLOCATION TMJ B/L	7070
KS25-0234	DISTRACTION OSTEOGENESIS	27240
KS25-0235	DRESSING OMFS	2600
KS25-0236	ENUCLEATION OF CYST-MAJOR	14360
KS25-0237	FACIAL ASYMMETRY CORRECTION - MAJOR	123860
KS25-0238	FACIAL ASYMMETRY CORRECTION - MODERATE	94140
KS25-0239	FIBRE SPLINTING	12380
KS25-0240	FNOE# ORIF GRADE1	49540
KS25-0241	FNOE# ORIF GRADE2	84940

DENTAL

CODE	DESCRIPTION	CHARGES
KS25-0242	FRACTURE FRONTAL BONE (MINOR)	37150
KS25-0243	FRACTURE JAW INTERAL FIXATION MAJOR	33830
KS25-0244	FRACTURE JAW INTERAL FIXATION MEDIUM	25380
KS25-0245	FRACTURE JAW INTERAL FIXATION MINOR	18630
KS25-0246	FRACTURE NASAL BONE, CLOSED REDUCTION	9910
KS25-0247	FRACTURE NASAL BONE, OPEN REDUCTION	18590
KS25-0248	FRACTURE ORBIT (MAJOR)	30970
KS25-0249	FRACTURE ORBIT (MINOR)	18590
KS25-0250	FRACURE FRONTAL BONE (MAJOR)	47060
KS25-0251	GENIOPLASTY COSMETIC CORRECTION	37150
KS25-0252	GUNSHOT INJURY	47060
KS25-0253	ILIAC BONE GRAFTING	61930
KS25-0254	IMF SCREW REMOVAL	2600
KS25-0255	IMPACTED CANINES PALATE	21060
KS25-0256	IMPACTION CANINE	9520
KS25-0257	IMPACTION EXTENSIVE	10470
KS25-0258	IMPACTION SMALL	7490
KS25-0259	INTERMAXILLARY FIXATION MAJOR	16390
KS25-0260	INTERMAXILLARY FIXATION MEDIUM	10250
KS25-0261	INTERMAXILLARY FIXATION MINOR	6150
KS25-0262	JAW DEFORMITY CORRECTION	117680
KS25-0263	LIFEST- I OSTEOTOMY COSMETIC CORRECTION	55740
KS25-0264	LIFEST- II OSTEOTOMY COSMETIC CORRECTION	92900
KS25-0265	LIFEST- III OSTEOTOMY COSMETIC CORRECTION	123860
KS25-0266	LUDWIG'S ANGINA	10890
KS25-0267	LYMPHNODE BIOPSY	22420
KS25-0268	MANAGEMENT OF CYSTIC LESIONS- MAJOR	37150
KS25-0269	MANAGEMENT OF CYSTIC LESIONS- MODERATE	24770
KS25-0270	MANDIBLE # COMMINUTION ORIF	58980
KS25-0271	MANDIBLE # DISPLACEMENT	36570
KS25-0272	MANDIBLE OSTEOTOMY	63170
KS25-0273	MANDIBLE# B/L ORIF	56620
KS25-0274	MARSUPILIZATION OF CYST-MAJOR	24630
KS25-0275	MARSUPILIZATION OF CYST-MEDIUM	18480
KS25-0276	MARSUPILIZATION OF CYST-MINOR	14360
KS25-0277	MAXILLARY OSTEOTOMY	63170
KS25-0278	MAXILLOFACIAL DRESSING	2730
KS25-0279	MAXILLOFACIAL IMPLANT REMOVAL – MULTIPLE SITE	37150
KS25-0280	MAXILLOFACIAL IMPLANT REMOVAL – SINGLE SITE	26010
KS25-0281	MIDFACE# ORIF	58980
KS25-0282	MINIPLATE REMOVAL	2730
KS25-0283	MMF	25950
KS25-0284	MOUTH OPENING PROCEDURE IN TRISMUS/ FRACTURE CASES	1560
KS25-0285	MUCOCELE EXCISION	6800
KS25-0286	MULTIPLE FACIAL LACERATION REPAIR	26010
KS25-0287	NASAL PACKING ANTERIOR	7070
KS25-0288	NASAL PACKING POSTERIOR	12980
KS25-0289	NERVE REPOSITIONING	30770
KS25-0290	OPEN REDUCTION FRACTURE MANDIBLE -MAJOR	33830
KS25-0291	OPEN REDUCTION FRACTURE MANDIBLE -MEDIUM	25380

DENTAL

CODE	DESCRIPTION	CHARGES
KS25-0292	OPEN REDUCTION FRACTURE MANDIBLE -MINOR	16920
KS25-0293	OPEN REDUCTION FRACTURE MAXILLA -MAJOR	33830
KS25-0294	OPEN REDUCTION FRACTURE MAXILLA -MEDIUM	25380
KS25-0295	OPEN REDUCTION FRACTURE MAXILLA -MINOR	16920
KS25-0296	OPEN REDUCTION ZYQOMATIC COMPLEX -MAJOR	27070
KS25-0297	OPEN REDUCTION ZYQOMATIC COMPLEX -MEDIUM	21990
KS25-0298	OPEN REDUCTION ZYQOMATIC COMPLEX WITH BONES PLANTING-MINOR	16920
KS25-0299	ORBITAL BLOWOUT# FLOOR RECON.	38930
KS25-0300	ORBITAL BLOWOUT# MEDIAL WALL	38930
KS25-0301	ORBITAL BLOWOUT# TOTAL RECONSTRUCTION	73130
KS25-0302	OROANTRAL FISTULA REPAIR (MAJOR)	20440
KS25-0303	OROANTRAL FISTULA REPAIR (MINOR)	13630
KS25-0304	ORTHOGNATHIC SURGERY BIJAW PROCEDURE	40870
KS25-0305	PALATAL CYST/TUMOR	43640
KS25-0306	PANFACIAL TRAUMA/ FRACTURE	74320
KS25-0307	PAROTIDECTOMY DEEP	73130
KS25-0308	PAROTIDECTOMY SUPERFICIAL	37750
KS25-0309	PARTIAL MAXILLECTOMY	45830
KS25-0310	PERI CORONECTOMY	940
KS25-0311	PRIMARY SUTURING OF WOUND	5050
KS25-0312	RANULA EXCISION	33450
KS25-0313	RECONSTRUCTION OF JAW- FREE FLAP	111470
KS25-0314	RECONSTRUCTION OF JAW- PLATE	42100
KS25-0315	REDUCTION OF SUBLUXATED JOINT	1700
KS25-0316	REIMPLANTATION PER TOOTH EXTENSIVE	4100
KS25-0317	REMOVAL IMPLANT	2080
KS25-0318	REPAIR (1ST CLOSURE) FACIAL LACERATION (MAJOR)	10890
KS25-0319	REPAIR (1ST CLOSURE) FACIAL LACERATION (MEDIUM)	8170
KS25-0320	REPAIR (1ST CLOSURE) FACIAL LACERATION (MINOR)	4080
KS25-0321	REPAIR OF INTRAORAL TISSUE LACERATION (MAJOR)	9520
KS25-0322	REPAIR OF INTRAORAL TISSUE LACERATION (MEDIUM)	6800
KS25-0323	REPAIR OF INTRAORAL TISSUE LACERATION (MINOR)	4080
KS25-0324	REPLANT TOOTH	2460
KS25-0325	RHINOPLASTY	49540
KS25-0326	RIDGE AVGMENLATION EXTENSIVE	20530
KS25-0327	RIDGE AVGMENLATION SMALL	12300
KS25-0328	SECONDARY ALVEOLAR BONE GRAFTING	38400
KS25-0329	SINUS LIFT PROCEDURE	18480
KS25-0330	SPACE INFECTION MANAGEMENT (SURGICAL) - MAJOR	30970
KS25-0331	SPACE INFECTION MANAGEMENT (SURGICAL) - MEDIUM	24770
KS25-0332	SPACE INFECTION MANAGEMENT (SURGICAL) - MINOR	22290
KS25-0333	SPLINTING PER TOOTH	990
KS25-0334	STL PLANNING GRADE 1	9440
KS25-0335	STL PLANNING GRADE 2	14160
KS25-0336	STL PLANNING GRADE 3	23590
KS25-0337	SUBMUCOUS FIBROSIS BAND EXCISION	27240
KS25-0338	SUBMUCOUS FIBROSIS BAND EXCISION + RECONSTRUCTION NASOLABIAL FLAP	64410
KS25-0339	SUBMUCOUS FIBROSIS BAND EXCISION + SKIN GRAFTING	49540
KS25-0340	SURGICAL MANAGEMENT TUMORS	61000
KS25-0341	SURGICAL MANAGEMENT LUDWIGS ANGINA	52000

DENTAL

CODE	DESCRIPTION	CHARGES
KS25-0342	SURGICAL MANAGEMENT OF TMJ DERANGEMENT - BILATERAL	90000
KS25-0343	SURGICAL MANAGEMENT OF TMJ DERANGEMENT - UNILATERAL	55000
KS25-0344	SURGICAL PROCEDURE FOR ALL WISDOM TEETH REMOVAL UNDER GA	68000
KS25-0345	SURGICALLY ASSISTED RAPID PALATAL EXPANSION	20440
KS25-0346	SUTURE REMOVAL - MINOR	1110
KS25-0347	SUTURE REMOVAL- MAJOR	1850
KS25-0348	TMJ APPLIANCE (AUSTRALIA)	12380
KS25-0349	TMJ APPLIANCE (KOREAN)	14860
KS25-0350	TMJ ARTHROCENTESIS	10890
KS25-0351	TMJ ARTHROSCOPY-DIAGNOSTIC	24770
KS25-0352	TMJ JOINT ANKYLOSIS RELEASE	61930
KS25-0353	TMJ JOINT REPLACEMENT – UNILATERAL	92900
KS25-0354	TMJ SURGERY-MAJOR	51280
KS25-0355	TMJ SURGERY-MEDIUM	41040
KS25-0356	TMJ SURGERY-MINOR	30770
KS25-0357	TOTAL MAXILLECTOMY	64410
KS25-0358	TRANSALVOELARSURGERY WISDOM TEETH U/L	24770
KS25-0359	TRANSALVOELARSURGERY ALL WISDOM TEETH	48360
KS25-0360	TUMOR RESECTION OF JAW	80510
KS25-0361	WOUND DRESSING (PER DRESSING)	490
KS25-0362	ZYGOMATIC ARCH COMMINUTED#ORIF	58980
KS25-0363	ZYGOMATIC IMPLANTS B/L	117970
KS25-0364	ZYGOMATIC IMPLANTS U/L	64880
MUCOGINGIVAL SURGERIES		
KS25-0365	BONE GRAFTING FOR IMPLANTS	6370
KS25-0366	CONNECTIVE TISSUE GRAFTING PER TOOTH	17360
KS25-0367	FREE GINGIVAL GRAFT /SUB EPITHELIAL CONNECTIVE TISSUE GRAFT FOR ROOT COVERAGE	11550
KS25-0368	FREE GINGIVAL GRAFTING PER TOOTH	13690
KS25-0369	LASER CROWN LENGTHENING	3830
KS25-0370	LASER DEPIGMENTATION PER QUADRANT	6370
KS25-0371	LASER FIBROMA REMOVAL	6370
KS25-0372	LASER FIBROMA REMOVAL (LARGE)	10190
KS25-0373	LASER FLAP SURGERY PER QUADRANT	12090
KS25-0374	LASER FRENECTOMY	6060
KS25-0375	LASER GINGIVAL CURETTAGE PER SEGMENT	5090
KS25-0376	LASER GINGIVECTOMY PER QUADRANT	6370
KS25-0377	LASER GINGIVOPLASTY	6370
KS25-0378	LASER LEUKOPLAKIA REMOVAL	12730
KS25-0379	LASER OPERCULECTOMY	6060
KS25-0380	LASER P.O. PAIN, MOUTH ULCER, MUCOSITIS, MOUTH OPENING (PER SITTING)	1900
KS25-0381	LASER PULPECTOMY	4840
KS25-0382	LASER PULPOTOMY	4840
KS25-0383	LASER RESURFACING	11460
KS25-0384	LASER TMJ PAIN, HEAD & NECK PAIN (PER SITTING)	1900
KS25-0385	LASER VESTIBULOPLASTY	6060
KS25-0386	LATERAL PEDICLE GRAFT FOR ROOT COVERAGE	8080
KS25-0387	PRF (PLATELET RICH FIBRIN) MEMBRANE PLACEMENTS - EXTENSIVE	8080
KS25-0388	PRF (PLATELET RICH FIBRIN) MEMBRANE PLACEMENTS - MEDIUM	5770
IMPLANT		

DENTAL

CODE	DESCRIPTION	CHARGES
KS25-0389	BIO OSS BONE AUGMENTATION	21780
KS25-0390	BIO OSS MEMBELANCE	25460
KS25-0391	CERMET CROWN (Crown charge extra)	1260
KS25-0392	COST OF MICRO IMPLANT	6930
KS25-0393	COST OF PLACEMENT OF MICRO IMPLANT PROCEDURE	5770
KS25-0394	IMPLANTS - NOBEL ACTIVE	63670
KS25-0395	IMPLANTS - NOBEL REPLACE	53470
KS25-0396	SCREW RETAINED (Crown charge extra)	1900
KS25-0397	TRANSALVEOLAR EXTRACTION ROOT STUMP	6370
KS25-0398	TRANSALVEOLAR EXTRACTION TOOTH	6620
PROCEDURE UNDER GA		
KS25-0399	CEMENT FILLING GA	3830
KS25-0400	COMPLETE TOOTH BUILDUP GA	7630
KS25-0401	COMPOSITE FILLING GA	6370
KS25-0402	DENTAL IMPLANT GA	70040
KS25-0403	FLAP SURGERY GA	6370
KS25-0404	IMPACTION CANINE GA	12730
KS25-0405	IMPACTION EXTENSIVE GA	15280
KS25-0406	IMPACTION SMALL GA	10190
KS25-0407	LAWA CLASSIC CROWN GA	25460
KS25-0408	LAWA PREMIUM CROWN GA	31830
KS25-0409	MINERAL TRIOXIDE AGGREGATE APPLICATION	3830
KS25-0410	PULP CAPPING GA	1900
KS25-0411	PULPOTOMY GA	3180
KS25-0412	ROOT CANAL TREATMENT GA	7630
KS25-0413	SURGICAL EXTRACTION GA	5090
KS25-0414	W-99 CROWN GA	12730
KS25-0415	ZIRCONIA CROWN GA	19110

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
	GENERAL SURGERY			
A. HEAD & NECK				
KS25-0416	BLOCK DISSECTION CERVICAL NODES	16050	20100	24100
KS25-0417	CERVICAL ABSCESS DRAINAGE	5350	6700	8050
KS25-0418	COMMANDO PROCEDURE (Combined Mandibul & Oral Cancer Resection)	39740	52980	63480
KS25-0419	CYST & BENIGN TUMOUR OF THE PALATE	11020	13740	16500
KS25-0420	DENTAL CYSTS & RE-CONSTRUCTION OF JAW	35100	43850	52620
KS25-0421	DENTAL CYSTS & TUMOUR EXCISION ONLY	11020	13740	16500
KS25-0422	EXCISION CYSTIC HYGROMA (MAJOR)	15410	19230	23090
KS25-0423	EXCISION OF PHARYNGEAL POUCH & OESOPHARYNGEAL MYOT	17610	22020	26420
KS25-0424	HEMITHYROIDECTOMY	28570	35710	42830
KS25-0425	LINGUAL THYROID	11020	13740	16500
KS25-0426	PARATHYROIDECTOMY	24240	30300	36370
KS25-0427	PAROTID ABSCESS (INCISION & DRAINAGE)	15990	19980	23980
KS25-0428	PARTIAL GLOSSECTOMY	13270	16580	19880
KS25-0429	PERIVERTEBRAL ABSCESS DRAINAGE	21270	26610	31930
KS25-0430	PULL THROUGH TOTAL GLOSSECTOMY	35100	43850	52620
KS25-0431	RADICAL NECK DISSECTION	30710	38390	46050
KS25-0432	RANULA	8910	11160	13390
KS25-0433	SUB-TOTAL LOBECTOMY	15410	19230	23090
KS25-0434	SUB-TOTAL THYROIDECTOMY	28570	35710	42830
KS25-0435	SUPERFICIAL PAROTIDECTOMY	25970	32460	38940
KS25-0436	THORACOSCOPIC LUNG NODULE EXCISION	30710	38390	46070
KS25-0437	THORACOSCOPIC PERICARDIAL WINDOW	30710	38390	46070
KS25-0438	TOTAL PAROTIDECTOMY	35100	43850	52620
KS25-0439	TUBE DRAINAGE OF PERIPANCREATIC COLLECTION	23260	29070	34890
B. BREAST				
KS25-0440	AXILLARY CLEARANCE	11650	14620	17530
KS25-0441	BREAST ABSCESS DRAINAGE	8700	10860	13030
KS25-0442	CORRECTION OF NIPPLE	26630	33260	39910
KS25-0443	EXCISION AXILLARY PAD OF FAT	26630	33260	39910
KS25-0444	EXCISION FIBROADENOMA BREAST - LARGE	10580	12450	14940
KS25-0445	EXCISION FIBROADENOMA BREAST - SMALL	8960	10550	12650
KS25-0446	EXCISION OF BREAST SINUS	13380	16700	20030
KS25-0447	EXCISION OF DUCT COMPLEX	19120	23900	28680
KS25-0448	EXCISION OF GYNAECOMASTIA	26630	33260	39910
KS25-0449	EXCISION OF MAMMARY FISTULA	12390	15480	18610
KS25-0450	FNAC (USG GUIDED)	4210	4210	4210
KS25-0451	LUMPECTOMY	13460	16840	20210
KS25-0452	MICRODECTOMY	11700	14620	17530
KS25-0453	OPERATION FOR ACCESSORY BREAST	16910	20840	25370
KS25-0454	PATEY'S RADICAL MASTECTOMY	23960	29940	35910
KS25-0455	RADICAL MASTECTOMY/ MODIFIED	29270	36590	43890
KS25-0456	RETROPERITONEAL TURNOR EXCISION	36990	46250	55510

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0457	SEGMENTAL RESECTION OF BREAST	18770	23460	28130
KS25-0458	SEGMENTECTOMY	18770	23460	28130
KS25-0459	SIMPLE MASTECTOMY	15960	19950	23960
KS25-0460	SUBCUTANEOUS MASTECTOMY	26630	33260	39910
KS25-0461	TRUCUT BREAST BIOPSY	5350	6700	8050
C. HERNIA				
KS25-0462	CHIVATE PROCEDURE (TRANS AND SUTURE HAEMORRHOIDOPEXY)	28000	35000	42000
KS25-0463	COMPLEX HERNIA /MULTIPLE	31640	37950	45540
KS25-0464	EPIGASTRIC HERNIA	17580	21980	26370
KS25-0465	FEMORAL HERNIA	17580	21980	26370
KS25-0466	HERNIOPLASTY (REPAIR OF HERNIA) - BILATERAL	26660	33320	39980
KS25-0467	HERNIOPLASTY (REPAIR OF HERNIA) - UNILATERAL	14780	18490	22190
KS25-0468	INCISIONAL HERNIA	29290	35140	42170
KS25-0469	INGUINAL HERNIA REPAIR BASSINI OR ANY OTHER (HERNIORRHAPHY) - Bilateral	22050	27530	33080
KS25-0470	INGUINAL HERNIA REPAIR BASSINI OR ANY OTHER (HERNIORRHAPHY) - Unilateral	14640	17580	21090
KS25-0471	LARGE COMPLICATED INCISIONAL HERNIA - MESH HERNIOPLASTY	37180	46470	55770
KS25-0472	LASER ABLATION OF PILONIDAL SINUS	28000	35000	42000
KS25-0473	OPERATION FOR SCROTAL HERNIA	28340	33320	39980
KS25-0474	OPERATION OF OBSTRUCTED / IRREDUCIBLE GROIN HERNIA	27220	32010	38420
KS25-0475	RARE HERNIA - Spigelian/ Obturator/ Lumbar/ Paraumbilical/ Sciatic	17130	21430	25710
KS25-0476	STRANGULATED HERNIA REPAIR WITH RESECTION & ANASTOMOSIS	26400	33010	39600
KS25-0477	STRANGULATED HERNIA REPAIR WITHOUT RESECTION & ANASTOMOSIS	23260	29070	34890
KS25-0478	STRANGULATED VENTRAL OR INCISIONAL HERNIA	29290	35140	42170
KS25-0479	UMBILECTOMY	13270	16580	19880
KS25-0480	UMBILICAL HERNIA REPAIR WITH MESH	15660	18430	22110
KS25-0481	VENTRAL HERNIA	20390	25500	30620
D. ABDOMEN				
KS25-0482	ABSCESS DRAINAGE PERINEPHRIC/ PELVIC COLLECTION /RIGHT PARACOLIC GUTTER	18450	22120	26560
KS25-0483	ABSCESS DRAINAGE SUBDIAPRAGMATIC / PELVIC	19840	24790	29780
KS25-0484	ADHESIOLYSIS	17130	21440	25710
KS25-0485	ANTERIOR COMPONENT SEPARATION	29290	35140	42170
KS25-0486	BURST ABDOMEN REPAIR	15960	19930	23950
KS25-0487	CYSTO GASTROSTMY	20120	25150	30170
KS25-0488	DIAPHRAGMATIC RUPTURE REPAIR	29160	36460	43750
KS25-0489	ENDOSCOPIC SCLEROTHERAPY	8380	10490	12620
KS25-0490	EXCISION OF ABDOMINAL WALL LUMP	18500	23110	27740
KS25-0491	EXPLORATORY LAPAROTOMY	18720	23400	28080
KS25-0492	EXPLORATORY LAPAROTOMY WITH ILEOSTOMY OR COLOSTOMY (SUR)	30710	38390	46070
KS25-0493	EXPLORATORY LAPROTOMY AND DRAINAGE OF MULTIPLE ABSCESSES	30710	38390	46070
KS25-0494	FIBRE-OPTIC OESOPHAGOGASTRO DUODENOSCOPY & BIOPSY	7360	9200	11030
KS25-0495	GASTRO - JEJUNOSTOMY	17720	22160	26610
KS25-0496	GASTROSTOMY OR JEJUNOSTOMY	14350	17920	21520
KS25-0497	GASTROTOMY + OVER RUNNING OF BLEEDING GU/DU	25610	32010	38410
KS25-0498	GUN SHOT INJURIES	30100	37630	45130

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0499	HIGHLY SELECTIVE VAGOTOMY	19430	24270	29120
KS25-0500	ILEAL/COLONIC RESECTION FOR LOWER GI BLEEDING	44000	55010	66000
KS25-0501	JEJUNAL INTERPOSITION FOR PROBLEM AFTER POLYA GASTRECTOMY	31610	39500	47390
KS25-0502	JEJUNOJEJUNOSTOMY	25120	31360	37650
KS25-0503	LUMBAR SYMPATHECTOMY	20120	25130	30160
KS25-0504	MISCELLANEOUS - MAJOR	20110	25120	30130
KS25-0505	MISCELLANEOUS - MEDIUM	15110	18910	22680
KS25-0506	MISCELLANEOUS - MINOR	10010	12540	15040
KS25-0507	OMENTECTOMY PARTIAL	6320	7910	9480
KS25-0508	OMENTECTOMY TOTAL	7550	9430	11330
KS25-0509	OMENTOPEXY	24450	30570	36670
KS25-0510	OPERATION FOR ABDOMINAL WALL HEMATOMA	17810	21360	25620
KS25-0511	PERCUTANEOUS LIVER ABSCESS DRAINAGE (SURG)	6560	8190	9830
KS25-0512	POSTERIOR COMPONENT SEPARATION	29290	35140	42170
KS25-0513	RECURRENT ULCERATION AFTER PREVIOUS VAGOTOMY & DRAINAGE	31760	39710	47650
KS25-0514	SECONDARY SUTURING OF GAPED WOUND (OTHER THAN ABDOMEN)	15960	19930	23950
KS25-0515	SIMPLE CLOSURE OF PROFORATED ULCER	17720	22160	26610
KS25-0516	SUBTOTAL GASTRECTOMY	27130	33900	40700
KS25-0517	SURGICAL MANAGEMENT OF HIATUS HERNIA & ORGANIC STRICTURE DUE TO REFLUX	24110	30130	36170
KS25-0518	TOTAL GASTRECTOMY FOR CANCER	31760	39710	47650
KS25-0519	TRANSVERSUS ABDOMINIS RELEASE	24750	27500	30250
KS25-0520	VAGOTOMY AND DRAINAGE PROCEDURE	19430	24270	29120
KS25-0521	ZOLLINGER ELLISON SYNDROME TOTAL - Gastrectomy & Management of Primary Lesion	31610	39500	47390
SPLEEN & OPERATION FOR PORTAL HYPERTENSION				
KS25-0522	SPLENECTOMY	21980	27480	32970
KS25-0523	SPLENORRAPHY	26730	33440	40120
KS25-0524	SUB CARDIAC POST OESOPHAGUS DISCONNECTION & DEVASCULARISATION OF LOWER OESOPHA A) ONLY ONE PROCEDURE	19160	23940	28730
KS25-0525	SUB CARDIAC POST OESOPHAGUS DISCONNECTION & DEVASCULARISATION OF LOWER OESOPHAGUS B) BOTH TOGETHER	25520	31880	38260
KS25-0526	TRANSECTION OESOPHAGUS USING EEA STAPLER	24280	30360	36440
ADRENAL GLANDS				
KS25-0527	BILLATERAL TOTAL ADRENALECTOMY	34110	42640	51140
KS25-0528	NEOPLASM OF ADRENAL GLAND	31750	39670	47610
KS25-0529	SUBTOTAL ADRENALECTOMY UNILATERAL	27270	34090	40900
APPENDIX				
KS25-0530	APPENDICECTOMY (Gen. Surg.)	20830	26040	31250
KS25-0531	APPENDICULAR ABCESS DRAINAGE	11910	14860	17860
SMALL INTESTINES				
KS25-0532	CLOSURE OF DUODENAL PERFORATION	16220	20320	24390
KS25-0533	INTESTINAL FISTULA	25520	31880	38260
KS25-0534	INTSUSSCEPTION (ONLY REDUCTION)	16820	21020	25230
KS25-0535	LYMPH NODE EXCISION	5530	6910	8300
KS25-0536	MECKEL'S DIVERTICULUM (EXCISION ONLY)	17640	22030	26440
KS25-0537	MESENTERIC CYST	17640	22030	26440
KS25-0538	RESECTION & ANASTOMOSIS OF SMALL INTESTINES	24300	30360	36440

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0539	STAPLED ANASTOMOSIS OF BOWEL	26340	30990	37180
KS25-0540	STRICTUROPLASTY	17100	21360	25630
LIVER				
KS25-0541	COMPLEX LIVER INJURIES	39580	49470	59370
KS25-0542	EXCISION OF MESENTERIC CYST	20420	25540	30660
KS25-0543	HYDATID CYST OF LIVER	30990	38720	46440
KS25-0544	OPEN DRAINAGE OF LIVER ABSSECES	17640	22030	26440
KS25-0545	PARTIAL RESECTION OF THE LIVER LATERAL SEGMENTECTOMY	22790	28490	34180
BILIARY SYSTEM				
KS25-0546	CHOLECYSTECTOMY	24450	30560	36680
KS25-0547	CHOLECYSTECTOMY & CHOLEDOCHODUDENOSTOMY	33860	42330	50790
KS25-0548	CHOLECYSTECTOMY & CHOLEDOCHOTOMY	30110	37620	45130
KS25-0549	CHOLECYSTOSTOMY	15410	19230	23090
KS25-0550	HEPATICO JEJUNOSTOMY	28250	35300	42380
KS25-0551	OPERATION FOR CBD STONE	29780	35730	42880
KS25-0552	REPAIR OF BILE DUCT STRICTURE	31610	39500	47390
KS25-0553	RESECTION OF CA OF COMMON HEPATICDUCT & REPAIR	31610	39500	47390
ANORECTAL				
KS25-0554	ANAL DILATATION	3220	4030	4840
KS25-0555	ANAL SHINCTER REPAIR AFTER INJURY	36990	46250	55510
KS25-0556	ANOPLASTY	28560	35670	42790
KS25-0557	CLOSED & LATERAL SPHINCTEROTOMY	12430	15550	18670
KS25-0558	COMPLEX/RECURRENT FISTULA IN ANO	27190	33960	40750
KS25-0559	EXCISION OF HYPERTROPHIC PAPILLAE	8760	10490	12620
KS25-0560	EXCISION RECTAL POLYP	6350	7930	9530
KS25-0561	FISSURECTOMY	9450	11810	14190
KS25-0562	FISTULA IN ANO - A) Low Level	10530	13140	15760
KS25-0563	FISTULA IN ANO - B) High Level	18670	23330	27980
KS25-0564	GLUTEAL ABSCESS	5350	6700	8050
KS25-0565	HAEMORRHOIDECTOMY - STAPLED	21540	26930	32320
KS25-0566	HAEMRRHOIDECTOMY	17120	21400	25680
KS25-0567	HEAMORRHOIDECTOMY FOR PROZAPSED PILES	17780	21330	25600
KS25-0568	INJ. HAEMORRHOIDS /SCLEROTHERAPY	2650	3310	3970
KS25-0569	ISCHIO-RECTAL ABSCESS	9430	11800	14160
KS25-0570	LASER HAEMORRHOIDECTOMY	18040	22550	27030
KS25-0571	PERIANAL ABSCESS	6650	8330	9980
KS25-0572	PILONIDAL SINUS a) - EXCISION ONLY	11590	14510	17400
KS25-0573	PILONIDAL SINUS b) - PRIMARY CLOSURE	15150	18920	22710
KS25-0574	PILONIDAL SINUS-FLAP ROTATION	21060	26320	31610
KS25-0575	RECTOVAGINAL & OTHER FISTULAE BETWEEN INTESTINE & GENITAL	22110	27630	33190
KS25-0576	REPAIR OF FISTULA BY ADVANCEMENT FLAP	22090	27580	33100
KS25-0577	SETON APPLICATION	14400	18010	21650
KS25-0578	THIERSCH'S PROCEDURE	6350	7930	9530
COLORECTAL				

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0579	ABDOMINOPERINEAL EXCISION OF RECTUM	21990	27500	33000
KS25-0580	ABDOMINOPERINEAL PULL THROUGH RESECTION WITH COLORECTAL ANASTOMOSIS	22090	27580	33100
KS25-0581	ANTERIOR RESECTION	25430	31810	38180
KS25-0582	CLOSURE OF LOOP COLOSTOMY	12260	15310	18410
KS25-0583	COLECTOMY (TOTAL)	42220	52760	63320
KS25-0584	COLOSTOMY TRANSVERSE / SIGMOID	12730	15910	19080
KS25-0585	COMPLETE RECTAL PROLAPSE REPAIR / WELLS OPERATION - RIPSTEIN OPERATION	18580	23210	27850
KS25-0586	HIRSCHSPRUNGS	27400	34220	41060
KS25-0587	IIEOSTOMY & IIEORECTAL ANASTOMOSIS	28560	35670	42790
KS25-0588	ILEOSTOMY OR COLOSTOMY	15150	18920	22710
KS25-0589	IMPERFORATE ANUS WITH LOW OPENING	9900	12390	14850
KS25-0590	LEFT HEMICOLECTOMY	22090	27580	33100
KS25-0591	OPEN DRAINAGE OF PSOAS ABSCESS	12730	15910	19080
KS25-0592	PROCTOCOLECTOMY	28560	35670	42790
KS25-0593	RIGHT HEMICOLECTOMY	22090	27580	33100
KS25-0594	SIGMOID & DESCENDING COLECTOMY	18580	23210	27850
KS25-0595	SIGMOLDOSOCOPY WITH OR WITHOUT BIOPSY	3340	4190	5020
KS25-0596	SURGICAL REPAIR OF ANAL SPHINCTER FOLLOWING INJURY	22090	27580	33100
KS25-0597	TRANSVERSE COLECTOMY	21060	26360	31620
KS25-0598	TUBE CAECOSTOMY	8820	11030	13220
KS25-0599	VOLVULUS OF COLON SIMPLE TWIST-RESECTION ANASTOMOSIS	17610	22020	26420
E. PELVIS & PERINEUM				
KS25-0600	ABDOMINAL RECTOPEXY	20440	25540	30660
KS25-0601	CIRCUMCISION (Gen. Surg.)	6460	8080	9690
KS25-0602	EPIDYDECTOMY (UNILATERAL)	8380	10490	12620
KS25-0603	FRENULOPLASTY	9720	11690	14040
KS25-0604	HYDROCELE - BILLATERAL	12020	15000	18010
KS25-0605	HYDROCELE - UNILATERAL	8030	10020	12040
KS25-0606	MEATOPLASTY	7500	9370	11250
KS25-0607	MEATOTOMY	3340	4190	5020
KS25-0608	MULTIPLE SEBACEOUS CYST OF SCROTAL SKIN	6650	8330	9980
KS25-0609	ORCHIDECTOMY - BILATERAL	19430	24270	29120
KS25-0610	ORCHIDECTOMY - UNILATERAL	11020	13740	16500
KS25-0611	ORCHIDOPEXY - BILATERAL (SUR.)	19840	24790	29770
KS25-0612	ORCHIDOPEXY - UNILATERAL (SUR.)	13210	16530	19840
KS25-0613	PARTIAL AMPUTATION PENIS	16870	21100	25330
KS25-0614	PERINEAL OPERATION FOR PROLAPSE RECTUM	16870	21100	25330
KS25-0615	SCROTOPLASTY	13930	17410	20900
KS25-0616	TESTICULAR BIOSPY - UNILATERAL	6050	7590	9070
KS25-0617	TESTICULAR BIOSPY - BILATERAL	9060	11330	13600
KS25-0618	TESTICULAR PROSTHESIS	15090	18860	22630
KS25-0619	TOTAL AMPUTATION OF PENIS WITH BLOCK DISSECTION - UNILATERAL	24280	30360	36440
KS25-0620	TOTAL AMPUTATION OF PENIS WITH BLOCK DISSECTION - BILATERAL	30720	38420	46120
KS25-0621	TOTAL AMPUTATION PENIS	22090	27580	33100

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0622	VARICOCELE / UNILATERAL	14640	17580	21090
KS25-0623	VASECTOMY	9700	12120	14550
KS25-0624	VASOEPIDIDOTOMY OPERATING (Microscope)	21340	26660	32010
KS25-0625	VASOVASECTOMY OR RECANALIZATION	19160	23940	28730
F. OTHER PROCEDURES				
KS25-0626	ABSCESS DRAINAGE - LARGE (Sur.)	8540	10660	12790
KS25-0627	ABSCESS DRAINAGE - MEDIUM (Sur.)	5480	6850	8230
KS25-0628	ASPIRATION ABSCESS	3480	3480	3480
KS25-0629	ASPIRATION BIOPSY	3480	3480	3480
KS25-0630	ASPIRATION COLD ABSCESS	3480	3480	3480
KS25-0631	ASPIRATION OF ABDOMINAL FLUID/ASCITIC TAP	4270	5350	6420
KS25-0632	ASPIRATIONOF PLEURAL EFFUSION/PLEURAL TAP	1880	2350	2830
KS25-0633	BIOPSY ULCER	3480	3480	3480
KS25-0634	CARBUNCLE (LARGE)	9550	11960	14350
KS25-0635	CARBUNCLE (SMALL)	5990	7460	8960
KS25-0636	CRYO CAUTERIZATION - LARGE PATCH	5480	6850	8230
KS25-0637	CRYO CAUTERIZATION - MEDIUM PATCH	3420	4260	5110
KS25-0638	CRYOTHERAPY (FOR WARTS/PILES)	3420	4260	5110
KS25-0639	DEBRIDEMENT (LARGE)	4120	4120	4120
KS25-0640	DEBRIDEMENT (MEDIUM)	3430	3430	3430
KS25-0641	DEBRIDEMENT (SMALL)	2750	2750	2750
KS25-0642	DEBRIDEMENT AND PRIMARY CLOSURE OF GUN SHOT WOUND/ REMOVAL OF BULLET	20110	25120	30130
KS25-0643	DEBRIDEMENT IN O.T	9290	11600	13940
KS25-0644	DEBRIDEMENT OF GUNSHOT WOUND (MINOR)	10040	12560	15080
KS25-0645	DELAYED PRIMARY SUTURING (PRIMARY/SECONDRARY)	9550	11960	14350
KS25-0646	DIABETIC GANGRENE (MAJOR)	8410	10530	12630
KS25-0647	DIABETIC GANGRENE (MINOR)	4580	5750	6870
KS25-0648	DRAINAGE OF PERIGASTRIC ABSCESS	13270	16580	19880
KS25-0649	DRAINAGE OF PSOAS	12730	15910	19080
KS25-0650	EXCISION OF CORN/WART (SINGLE)	3270	4090	4880
KS25-0651	EXCISION OF LARGE SARCOMA	44900	56130	67360
KS25-0652	EXCISION OF MULTIPLE SEBACEOUS CYST OF SCROTAL SKIN	7670	9580	11520
KS25-0653	EXCISION SEBACEOUS CYST (SMALL)	3270	4090	4880
KS25-0654	FOREIGN BODY REMOVAL LA (SUPERFICIAL)	3340	4190	5020
KS25-0655	INCISION & DRAINAGE ABSCESS (Large)	4730	5950	7130
KS25-0656	INCISION & DRAINAGE ABSCESS (Small)	2720	3390	4080
KS25-0657	INGROWING TOE NAIL	3380	3380	3380
KS25-0658	INJ. VARICOSE VENIS / GANGLLON / LIPOMA / DERMOLD etc.	2450	3060	3650
KS25-0659	LARGE SUPERFICIAL TUMOUR CYSTS	5030	6270	7530
KS25-0660	LIPOMA OR LARGE LUMP BACK EXCISION	13940	17430	20920
KS25-0661	LIPOMA OR SMALL LUMP EXCISION	9330	11640	13970
KS25-0662	LYMPH NODE BX. NECK / AXILLA / INGUINAL	3780	4730	5720
KS25-0663	MAJOR DRESSING IN O.T (Gen. Sur.)	2010	2470	2990
KS25-0664	MAJOR DRESSING IN WARD (Gen.Sur.)	480	620	760

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0665	NAIL BED WEDGE EXCISION	2010	2470	2990
KS25-0666	REDUCTION OF PARAPHIMOSIS	3380	3380	3380
KS25-0667	REPAIR OF TORN EAR LOBULES EACH	2790	3490	4180
KS25-0668	SMALL ABSCESS UNDER L/A	3480	3480	3480
KS25-0669	SMALL SUPERFICIAL TUMOUR	3340	4190	5020
KS25-0670	SUPRAPUBIC DRAINAGE	5250	6540	7850
KS25-0671	SUTURE LARGE LACERATION	3880	4860	5800
KS25-0672	SUTURING OF MASSIVE INCISIONAL FACIAL WOUND	10570	13190	15870
KS25-0673	SUTURING OF MULTIPLE SMALL / SINGLE MAJOR WOUND	3850	4780	5750
KS25-0674	SUTURING OF SMALL WOUNDS	3380	3380	3380
KS25-0675	TONGUE TIE RELEASE	2450	3060	3650
KS25-0676	TOTAL NAIL BED ABLATION	2450	3060	3650
KS25-0677	TRUECUT NEEDLE BIOPSY	3480	3480	3480
G. MINIMAL ACCESS SURGERY (LAPAROSCOPIC SURGERY)				
KS25-0678	ENDOSCOPIC REMOVAL OF BREAST LUMP	26290	32800	39360
KS25-0679	LAPROSCOPIC & HYSTEROSCOPIC WITH OVARIAN BIOPSY	15750	19690	23620
KS25-0680	LAPROSCOPIC & HYSTEROSCOPIC WITH OVARIAN DRILLING	15750	19690	23620
KS25-0681	LAPROSCOPIC & HYSTEROSCOPIC WITH TUBAL CANULATION	21010	26260	31480
KS25-0682	LAPROSCOPIC & HYSTEROSCOPY WITH CORNUAL CATHETERZATION	21010	26260	31480
KS25-0683	LAPROSCOPIC & HYSTEROSCOPY WITH FIMBRIOPLASTY /NEOSALPHINGOSTOMY	25670	32090	38520
KS25-0684	LAPROSCOPIC ABLATION OF ENDOMETRIOSIS	13940	17430	20930
KS25-0685	LAPROSCOPIC ADHESIOLYSIS	23330	31290	37560
KS25-0686	LAPROSCOPIC ADRENECTOMY	42790	53490	64180
KS25-0687	LAPROSCOPIC APPENDICECTOMY	23560	29450	35340
KS25-0688	LAPROSCOPIC APPENDICECTOMY (PAED).	20890	26090	31330
KS25-0689	LAPROSCOPIC ASSISTED / SMALL BOWEL RESECTION	42790	53490	64180
KS25-0690	LAPROSCOPIC ASSISTED LAR OF RECTUM	42790	53490	64180
KS25-0691	LAPROSCOPIC ASSISTED VAGINAL HYSTERECTOMY WITH BSO	51150	63960	76750
KS25-0692	LAPROSCOPIC BIOPSY	16000	21570	25900
KS25-0693	LAPROSCOPIC BIOPSY - LYMPHNODE/PERITONEUM/OMENTUN	18520	23140	27790
KS25-0694	LAPROSCOPIC BURCHES COLPOPEXY	34570	43210	51880
KS25-0695	LAPROSCOPIC CHOLE CYSTECTOMY & CBD EXPLORATION	42790	53490	64180
KS25-0696	LAPROSCOPIC CHOLECSYTECTOMY	25760	32200	38640
KS25-0697	LAPROSCOPIC CHOLECYSTECTOMY (PAED.)	26190	32770	39300
KS25-0698	LAPROSCOPIC CHOLECYSTODUODENAL FISTULA	40750	50950	61140
KS25-0699	LAPROSCOPIC CLOSURE OF DEODENAL / ILEAL PERFORATIONS	23690	29610	35540
KS25-0700	LAPROSCOPIC COLONIC SURGERY	40750	50950	61140
KS25-0701	LAPROSCOPIC CYSTECTOMY (U/L)	14370	17380	21190
KS25-0702	LAPROSCOPIC D&C / MTP WITH TUBECTOMY	13010	16310	19570
KS25-0703	LAPROSCOPIC DEROOFING OF RENAL CYST	37420	46750	56110
KS25-0704	LAPROSCOPIC DIAGNOSTIC	9050	11330	13600
KS25-0705	LAPROSCOPIC DIAGNOSTIC & BIOPSY LYMPHNODE, PENITONIM, ONENTUM /STG. LAPAROSCOPY FOR C	24490	30600	36740
KS25-0706	LAPROSCOPIC DIAGNOSTIC LAPROSCOPY D&C	12580	15740	18900
KS25-0707	LAPROSCOPIC DIAGNOSTIC WITH BIOPSY	10440	13050	15650

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0708	LAPROSCOPIC DIAGNOSTIC WITH CHROMOTUBATION WITH D&C	13630	17020	20430
KS25-0709	LAPROSCOPIC DIAPHRAGMATIC HERNIA	46140	57670	69200
KS25-0710	LAPROSCOPIC DIVERTICULECTOMY	42760	53450	64140
KS25-0711	LAPROSCOPIC DRAINAGE OF INTRA ABDOMINAL COLLECTION/ ABSCESS	18010	22510	27020
KS25-0712	LAPROSCOPIC DRAINAGE OF OVARIAN ABSCESS	12810	16020	19220
KS25-0713	LAPROSCOPIC DUODENAL PERFORATION CLOSURE	33310	41620	49950
KS25-0714	LAPROSCOPIC ECTOPIC LAPAROTOMY	23520	29400	35280
KS25-0715	LAPROSCOPIC E-TEP FOR ANT. ABDOMINAL WALL HERNIA	37410	44000	52820
KS25-0716	LAPROSCOPIC FALLOPIAN TUBE RECANALISATION	27290	34110	40950
KS25-0717	LAPROSCOPIC FUNDOPLICATION	48440	60530	72640
KS25-0718	LAPROSCOPIC FUNDOPLICATION (PAED.)	53280	66580	79930
KS25-0719	LAPROSCOPIC GASTRO JEJUNOSTOMY/JEJUNOJEJNOSTOMY/PARTIAL GASTRECTOMY	33690	42120	50540
KS25-0720	LAPROSCOPIC GASTROSTOMY	27530	34400	41290
KS25-0721	LAPROSCOPIC HEMICOLECTOMY	37990	47500	56980
KS25-0722	LAPROSCOPIC HERNIOTOMY (PAED.)	16100	20120	24160
KS25-0723	LAPROSCOPIC HIATUS HERNIA	40750	50950	61140
KS25-0724	LAPROSCOPIC HYDATID CYST. LIVER (UNILOCULAR)	32080	40070	48090
KS25-0725	LAPROSCOPIC HYSTERECTOMY - LAVH (ASSISTED VAGINAL HYSTERECTOMY)	45090	56340	67630
KS25-0726	LAPROSCOPIC HYSTERECTOMY TOTAL	49420	61730	74100
KS25-0727	LAPROSCOPIC HYSTERECTOMY TOTAL WITH BSO	57520	71870	86260
KS25-0728	LAPROSCOPIC INCISIONAL HERNIA	40750	50950	61140
KS25-0729	LAPROSCOPIC INGUINAL HERNIA - BILATERAL	32770	40950	49160
KS25-0730	LAPROSCOPIC INGUINAL HERNIA - UNILATERAL	30000	37500	45000
KS25-0731	LAPROSCOPIC INTRAPERITONALIZATION URETEROLYSIS	58230	72820	87380
KS25-0732	LAPROSCOPIC IRREDUCIBLE OBSTRUCTED HERNIA REPAIR	33690	42120	50560
KS25-0733	LAPROSCOPIC LIGATION	9070	11350	13630
KS25-0734	LAPROSCOPIC LIGATION OF VARICOCELE (UNILATERAL)	18510	23130	27750
KS25-0735	LAPROSCOPIC LIVER ABSCESS DRAINAGE	32080	40070	48090
KS25-0736	LAPROSCOPIC LUMBAR SYMPATHECTOMY	28360	35430	42540
KS25-0737	LAPROSCOPIC MESENTRIC CYST/MASS EXCISION/BIOPSY	35550	44440	53330
KS25-0738	LAPROSCOPIC MILKING FOR ECTOPIC PREGNANCY	26260	32810	39360
KS25-0739	LAPROSCOPIC MTP WITH TUBECTOMY	13050	16310	19560
KS25-0740	LAPROSCOPIC MYOMECTOMY FOR MORE THAN ONE MYOMA	34980	43750	52490
KS25-0741	LAPROSCOPIC MYOMECTOMY FOR SINGLE MYOMA	30590	38270	45940
KS25-0742	LAPROSCOPIC NEO-VAGINA CREATION	30590	38270	45940
KS25-0743	LAPROSCOPIC NEPHRECTOMY	42790	53490	64180
KS25-0744	LAPROSCOPIC OMENTECTOMY	16940	21100	25390
KS25-0745	LAPROSCOPIC OPERATION FOR EMPYEMA GALL BLADDER	30390	35750	42910
KS25-0746	LAPROSCOPIC OPERATION FOR SCROTAL HERNIA	33890	39890	47860
KS25-0747	LAPROSCOPIC ORCHIDECTOMY UNILATERAL	23690	29610	35540
KS25-0748	LAPROSCOPIC ORCHIOPEXY (PAED.)	18800	23500	28190
KS25-0749	LAPROSCOPIC OVARIAN CYSTECTOMY - BILATERAL	25430	31810	38180
KS25-0750	LAPROSCOPIC OVARIAN CYSTECTOMY - UNILATERAL	16580	20730	24870
KS25-0751	LAPROSCOPIC OVARIN DRILLING	14090	17640	21190

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0752	LAPROSCOPIC PARTIAL NEPHRECTOMY	51340	64180	77010
KS25-0753	LAPROSCOPIC PROCEDURES IN SCARRED ABDOMEN BECAUSE OF PREVIOUS OPERATIONS	67210	80650	96790
KS25-0754	LAPROSCOPIC PULL THROUGH/RESECTION & ANASTOMOSIS (PAED.)	32220	40250	48300
KS25-0755	LAPROSCOPIC PYELOLYMPHATIC DISCONNECTION	44120	55180	66220
KS25-0756	LAPROSCOPIC PYELOPLASTY	58230	72820	87380
KS25-0757	LAPROSCOPIC RADICAL HYSTERECTOMY	41960	52480	62940
KS25-0758	LAPROSCOPIC RADICAL NEPHRO-URETERECTOMY	62630	78290	93960
KS25-0759	LAPROSCOPIC RADICAL PROSTATECTOMY	72930	91180	109410
KS25-0760	LAPROSCOPIC RECTOPEXY	29170	36490	43790
KS25-0761	LAPROSCOPIC REMOVAL OF ENDOMETRIOMA WITH MODERATE ADHESIOLYSIS	34140	42670	51180
KS25-0762	LAPROSCOPIC REPAIR BY ANTERIOR /POSTERIOR/ RETRORECTUS METHOD FOR ABDOMINAL WALL H	45750	53820	64600
KS25-0763	LAPROSCOPIC REPAIR OF COMPLEX HERNIA/ RECURRENT	44850	53820	64590
KS25-0764	LAPROSCOPIC REPAIR OF RECTO VAGINAL FISTULA	17830	22290	26740
KS25-0765	LAPROSCOPIC REPAIR OF RECURRENT RECTO VAGINAL FISTULA	24320	30390	36480
KS25-0766	LAPROSCOPIC REPAIR OF UTERINE PERFORATION	14510	18130	21770
KS25-0767	LAPROSCOPIC REPAIR OF VESICOVAGINAL FISTULA (VVF)	54460	65350	78410
KS25-0768	LAPROSCOPIC RESECTION OF PARA -OVARIAN CYST	26260	32810	39360
KS25-0769	LAPROSCOPIC RESUPENSION OF VAGINAL VAULT	31480	39360	47270
KS25-0770	LAPROSCOPIC ROUX.EN.Y	50860	63560	76250
KS25-0771	LAPROSCOPIC SACROCOLPOPLEXY	29440	36770	44120
KS25-0772	LAPROSCOPIC SALPINGECTOMY (UNILATERAL)	23520	29400	35280
KS25-0773	LAPROSCOPIC SALPINGO OOPHORECTOMY (U/L)	18150	22680	27240
KS25-0774	LAPROSCOPIC SEGMENTAL LIVER RESECTION	42790	53490	64180
KS25-0775	LAPROSCOPIC SPLENECTOMY	42790	53490	64180
KS25-0776	LAPROSCOPIC SUPRACERVICAL HYSTERECTOMY. (SUB- TOTAL)	31480	39360	47270
KS25-0777	LAPROSCOPIC SURGERY FOR PANCREATIC PSENDOCYST (CYSTOGASTROSTOMY)	33690	42120	50560
KS25-0778	LAPROSCOPIC TOTAL HYSTERECTOMY (TLH) LESS THAN 14 WEEKS	34980	43710	52480
KS25-0779	LAPROSCOPIC TOTAL HYSTERECTOMY (TLH) MORE THAN 14 WEEKS	40680	50840	61010
KS25-0780	LAPROSCOPIC TRUNCAL VAGOTOMY	42790	53490	64180
KS25-0781	LAPROSCOPIC URTEROLITHOTOMY / PYELOLITHOTOMY	24710	30880	37050
KS25-0782	LAPROSCOPIC UTERINE CORNUAL EXCISION (ECTOPIC PREGNANCY)	30590	38270	45940
KS25-0783	LAPROSCOPIC VENTRAL HERNIA	28100	35110	42120
KS25-0784	LAPROSCOPIC WERTHEIM'S HYSTERECTOMY	53490	66860	80230
KS25-0785	STAPLED ANOPEXY	23690	29620	35550
KS25-0786	STARR PROCEDURE FOR ODS(OBSTRUCTED DEFECATION SYNDROME)	35550	44440	53330
METABOLIC SURGERY				
KS25-0787	GASTRIC BANDING	46570	58220	69870
KS25-0788	ROU.-EN-Y-GASTRIC BYPASS	75140	97680	117200
KS25-0789	SLEEVE RESECTION	63710	79620	95530

Note: Single incision Laparoscopic Surgery (S.I.L.S.) charges are 50% Extra
Cost of mesh, implants, stapler, cartridges and disposable material extra.

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
H. UROLOGY				
KS25-0790	A.V. FISTULA FOREARM	16000	20010	24020
KS25-0791	A.V. FISTULA UPPER ARM	20010	24990	30010
KS25-0792	ANDERSON HYNE'S PYELOPLASTY	30830	38530	46220
KS25-0793	AUGMENTATION CYSTOPLATY	31510	39380	47270
KS25-0794	BLADDER DIVERTICULECTOMY OPEN	27770	34740	41690
KS25-0795	BUCCAL MUCOSA HARVESTING	15120	18150	22680
KS25-0796	BUCCAL MUCOSA URETHROPLASTY	41830	52290	62780
KS25-0797	CAPD CATHETERINSERTION	17380	21740	26060
KS25-0798	CATHETER REMOVAL	360	460	520
KS25-0799	CATHETERISATION BY UROLOGIST	1000	1220	1460
KS25-0800	CIRCUMCISION (STAPLER)	12000	15000	18000
KS25-0801	CIRCUMCISION SURGERY (Uro. Surg.)	8050	9660	11580
KS25-0802	CLOSURE OF URETHRAL FISTULA	14390	17980	21570
KS25-0803	CYSTOLITHOTOMY SUPRAPUBLIC	12430	15550	18670
KS25-0804	CYSTOSCOPIC BASKETING OF STONE IN URETER	13720	17130	20580
KS25-0805	CYSTOSCOPIC CLOT EVACUATION & FULGURATION OF BLEEDER	14790	18490	22190
KS25-0806	CYSTOSCOPY DIAGNOSTIC	7360	9180	11020
KS25-0807	CYSTOSCOPY DJ REMOVAL-BILATERAL	9840	11810	14180
KS25-0808	CYSTOSCOPY DJ REMOVAL-UNILATERAL	8050	9660	11580
KS25-0809	CYSTOSCOPY WITH BLADDER BIOPSY	9950	12430	14940
KS25-0810	CYSTOSCOPY WITH RETROGRADE CATHETERISATION - BILATERAL	9950	12430	14940
KS25-0811	CYSTOSCOPY WITH RETROGRADE CATHETERISATION - UNILATERAL	7480	9370	11220
KS25-0812	D.J. STENTING - BILATERAL	16190	20250	24280
KS25-0813	D.J. STENTING - UNILATERAL	13200	16500	19800
KS25-0814	DILATATION OF STRICTURE URETHRA UNDER G.A.	3950	4950	5950
KS25-0815	DILATATION OF STRICTURE URETHRA WITHOUT ANAESTHESIA	2950	3660	4400
KS25-0816	ENDOPYELOTOMY	35450	44330	53200
KS25-0817	ENDOSCOPIC INCISION OF URETEROCELE	22490	28120	33770
KS25-0818	ENDOSCOPIC INJECTION OF BULKING AGENT	20890	26090	31330
KS25-0819	ENDOSCOPIC REMOVAL OF STONE IN BLADDER	14270	17820	21410
KS25-0820	ENDOSCOPIC TREATMENT OF VUR - BILATERAL	34630	43250	51920
KS25-0821	ENDOSCOPIC TREATMENT OF VUR - UNILATERAL	19780	24730	29660
KS25-0822	ENDOURETEROTOMY	26480	33080	39710
KS25-0823	EPIDIDYMECTOMY UNILATERAL	12530	15010	18040
KS25-0824	EPISPADIAS/EXYSTROPHY REPAIR	24780	30920	37140
KS25-0825	EXCISION OF EPIDIDYMIS CYST	9660	12060	14490
KS25-0826	EXCISION OF MULTIPLE CYSTS IN TESTIS/EPIDIDYMIS	17890	21470	25750
KS25-0827	EXPLORATORY SCROTOMY	8060	10110	12100
KS25-0828	GIL VERNIE'S EXTENDED PYELOLITHOMY	25670	32090	38500
KS25-0829	GUIDE WIRE ASSISTED CATHETERIZATION	3780	4730	5690
KS25-0830	ILIO CAECO CYTOPLASTY	24780	30920	37140
KS25-0831	LAPAROSCOPIC RADICAL NEPHRECTOMY	60000	75000	90000
KS25-0832	LASER BNI	30360	35730	42880

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0833	LASER LITHOTRIPSY	25710	30250	36310
KS25-0834	LASER OIU	30360	35730	42880
KS25-0835	LASER PROSTATECTOMY	37410	44000	52820
KS25-0836	LYMPHADENECTOMY (UNILATERAL)	17980	22460	26960
KS25-0837	MEATAL RECONSTRUCTION	19680	23610	28340
KS25-0838	MICRO PERC	44740	53670	64400
KS25-0839	MINI PERC	41410	49700	59630
KS25-0840	NEOBLADDER FORMATION	29260	36570	43860
KS25-0841	NEPHRECTOMY - SIMPLE	27640	34560	41460
KS25-0842	NEPHRECTOMY COMPLICATED TUMOUR OR ADHESIONS	25670	32090	38500
KS25-0843	NEPHROSTOMY - OPEN	16550	20710	24830
KS25-0844	NEPHROSTOMY - PERCUTANEOUS	8760	10940	13140
KS25-0845	OPEN PROSTATECTOMY	16550	20710	24830
KS25-0846	OPERATION FOR BLADDER INJURY	22600	28270	33910
KS25-0847	OPERATION FOR URACHAL CYST	27960	34920	41910
KS25-0848	OPERATION FOR URETERIC INJURY	22600	28270	33910
KS25-0849	OPTICAL URETHROTOMY	14960	18680	22440
KS25-0850	ORANDI'S URETHROPLASTY	41630	52050	62470
KS25-0851	ORCHIDECTOMY+CONTRALATERAL TESTICULAR FIXATION	22680	27240	32530
KS25-0852	ORCHIDOPEXY - BILATERAL (URO.)	19840	24790	29770
KS25-0853	ORCHIDOPEXY - UNILATERAL (URO.)	13210	16530	19840
KS25-0854	PARTIAL CYSTECTOMY	17980	22460	26960
KS25-0855	PARTIAL NEPHRECTOMY OR NEPHROLITHOTOMY	25670	32090	38500
KS25-0856	PCNL (PERCUTANEOUS NEPHROLITHOTOMY) MORE THAN 2 CM / STAGHOIN STONE	40860	51080	61270
KS25-0857	PCNL (PERCUTANEOUS NEPHROLITHOTOMY) UPTO 2 CM.	36080	45100	54120
KS25-0858	PENILE PROSTHESIS	40010	50040	60030
KS25-0859	PERCUTANEOUS CYSTOLITHOTOMY	26830	32210	38630
KS25-0860	PERINEAL URETHROSOMY	9480	11850	14230
KS25-0861	PERMA CATHETERIZATION	17020	21260	25520
KS25-0862	PIPE TEST	7220	7220	7220
KS25-0863	PLACEMENT OF MAMMOCATH	41410	49700	59630
KS25-0864	POSTERIOR URETHRAL VALVE FULGURATION	20010	24990	30010
KS25-0865	PRIAPISM - SHUNT	15960	19950	23960
KS25-0866	PRIAPISM CORPORAL IRRIGATION	9980	12470	14970
KS25-0867	PROSTATIC BIOPSY	9610	9610	9610
KS25-0868	PROSTATIC MASSAGE	1690	2120	2540
KS25-0869	PROSTHESIS FOR URINARY INCONTINENCE	40010	50040	60030
KS25-0870	PYELOLITHOTOMY	24780	30920	37140
KS25-0871	RADICAL CYSTECTOMY	48710	60860	73070
KS25-0872	RADICAL NEPHRECTOMY	46330	57910	69510
KS25-0873	RADICAL NEPHRO-URETERECTOMY (OPEN)	48710	60860	73070
KS25-0874	RADICAL ORHIDECTOMY	19140	23900	28710
KS25-0875	RADICAL PROSTECTOMY	42910	53650	64370
KS25-0876	RENORRHAPHY	22210	27770	33320

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0877	RESECTION BLADDER NECK ENDOSCOPIC	15110	18890	22640
KS25-0878	RETROGRADE INTRA RENAL SURGERY OF FLEXIBLE URS (RIRS)	33070	41340	49600
KS25-0879	RETROGRADE INTRARENAL SCLEROTHERAPHY	13570	16960	20370
KS25-0880	RETROGRADE PYELOGRAPY - BILATERAL	9430	11810	14180
KS25-0881	RETROGRADE PYELOGRAPY - UNILATERAL	6920	8630	10410
KS25-0882	SCROTAL ABSCESS/FOURNIER GANGRENE	10780	13460	16190
KS25-0883	SEMINO VESICULOGRAM	6500	8080	9710
KS25-0884	SIMPLE NEPHRECTOMY	27640	34560	41460
KS25-0885	SINGLE DRUG CHEMO/HORMONAL/BIGPHOPHONATE INJECTION	2100	2610	3130
KS25-0886	SUBSTITUTION URETHROPLASTY	49220	61520	73820
KS25-0887	SUPRA PUBIC CYSTOSTOMY	8700	10890	13050
KS25-0888	SUPRAPUBIC NEPHROSTOMY GUIDED CLOT REMOVAL	16500	20620	24750
KS25-0889	TOTAL CYSTECTOMY	29350	36670	44020
KS25-0890	TRANSURETHRAL RESECTION OF BLADDER TUMOUR	25330	31670	37990
KS25-0891	TRANSURETHRAL RESECTION OF PROSTATE (TURP)	24100	30110	36120
KS25-0892	URETERAL REIMPLANTATION	20780	25980	31180
KS25-0893	URETERIC DILATATION	14960	18680	22440
KS25-0894	URETERIC REIMPLANTATION BILATERAL	30830	38530	46220
KS25-0895	URETERO SIGMOID DIVERSION	18200	22790	27310
KS25-0896	URETEROLITHOTOMY	18890	23590	28320
KS25-0897	URETEROSCOPIC REMOVAL OF STONE	18860	23560	28270
KS25-0898	URETEROSCOPIC SURGERY	21470	25750	30900
KS25-0899	URETEROSCOPY GUIDED BIOPSY	26830	32210	38630
KS25-0900	URETEROSCOPY GUIDED DJ STENTING/BIOPSY	26830	32210	38630
KS25-0901	URETHRAL CALIBRATION	1680	2120	2550
KS25-0902	URETHROPLASTY - ONE STAGE PROCEDURE	27650	34570	41480
KS25-0903	URETHROPLASTY - TWO STAGE	27650	34570	41480
KS25-0904	URETHROPLASTY & PUBECTOMY	41830	52280	62740
KS25-0905	URINARY DIVERSION	27770	34740	41690
KS25-0906	URS - 2ND STAGE/DIAGNOSTIC	10920	13610	16350
KS25-0907	USG GUIDED CATHETER REMOVAL	3020	3770	4530
KS25-0908	VARICOCELECTOMY (MICROSCOPIC) UNILATERAL	25480	31880	38250
KS25-0909	VASO EPIDIDYMOSTOMY	16210	20270	24330
KS25-0910	VASO EPIDIDYMOSTOMY (UNDER MICROSCOPE)	21560	25870	31030
KS25-0911	VASO-VASOSTOMY (UNDER MICROSCOPE)	18000	21610	25920
KS25-0912	VESICO VAGINAL FISTULA	29350	36670	44020

LITHOTRIPSY

KS25-0913	ESWL<1CM	29070
KS25-0914	ESWL>2CM	46250
KS25-0915	ESWL1-2CM	35710

SURGICAL PROCEDURES

Code	Description	Charges
	KIDNEY TRANSPLANT	
KS25-0916	KIDNEY TRANSPLANT WITH DONOR NEPHRECTOMY OPEN/LAP _	550000

PACKAGE INCLUDES:

- Up to 8 days for Recipient, Recipient 5 days in ICU & 3 days ward.
- Up to 5 days for Donor.1-2 days in ICCU &3days ward.
- One Day Pre Operative& 7 Days Post Operative
- Donor Stay in Semi Private Ward & Recipient stay in Single Room.
- Post Operative lab charges&Radiology Service for Donor & Recipient up to discharge.
- Medicines & Medical Consumables worth Rs. 125000/- Donor and Recipient inclusive.
- Two Dialysis during stay.
- Transfusion service: Four unit of Blood & Three unit of FFP.

PACKAGE EXCLUDES:

- Pre Operative Donor Work up Or the recipient preparation include HLA typing& Cross Match.
- Recipient stay more than 8 days will be charged extra.
- Donor stay more than 5 days will be charged extra.
- Medication Gancyclovir, OKT3, FK506, ATG, IV IG (Immunoglobulin's), TPN, and other imported medication.
- Pre operative Dialysis.
- Any invasive cardiac imaging or intervention for heart disease that is required post operatively.
- Difference of room rent will be charged additionally if the Donor stays in higher category of ward.

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
I. PAEDIATRIC SURGERY				
KS25-0917	ABSCESS / I & D UNDER GA	8000	10000	12000
KS25-0918	ABSCESS DRAINAGE - LARGE	4500	5630	6750
KS25-0919	ABSCESS DRAINAGE - MEDIUM	3500	4380	5250
KS25-0920	ABSCESS DRAINAGE - SMALL	2500	3130	3750
KS25-0921	ANAL TRANSPOSITION FOR ECTOPIC ANUS	16000	20000	24000
KS25-0922	ANOPLASTY (PAED.)	17000	21250	25500
KS25-0923	APPENDICECTOMY OPEN (Paed. Surg.)	17000	21250	25500
KS25-0924	APPENDICULAR ABSCESS DRAINAGE (PAED.)	15000	18750	22500
KS25-0925	ASCITES TAP	2000	2500	3000
KS25-0926	ASSECESSORY DIGIT EXCISION-SIMPLE	6930	8660	10390
KS25-0927	B/L URETERIC REIMPLANTATION	30000	37500	45000
KS25-0928	BIOPSY SMALL TUMOUR EXCISION	10000	12500	15000
KS25-0929	BISHOP -KOOP PORCEDURE	24660	30820	36990
KS25-0930	BRANCHIAL CYST/FISTULA	15000	18750	22500
KS25-0931	CHEST TUBE INSERTION (PAED.)	5680	7100	8510
KS25-0932	CHEST TUBE MANIPULATION WITH DRESSING	1200	1500	1800
KS25-0933	CHORDEE CORRECTION	15000	18750	22500
KS25-0934	CIRCUMCISION (Paed. Surg.)	8500	10630	12750
KS25-0935	COLOSTOMY CLOSURE	17500	21880	26250
KS25-0936	COLOSTOMY WITH / WITHOUT BIOPSY	14000	17500	21000
KS25-0937	COMPLETE CORRECTION OF EA AND TEF	32830	41040	49260
KS25-0938	CYSTIC HYGROMA (LARGE)	18610	23230	27890
KS25-0939	CYSTIC HYGROMA (SMALL)	12400	15500	18610
KS25-0940	CYST-JEJUNOSTOMY	18810	23510	28210
KS25-0941	CYSTOGASTROSTOMY	18810	23510	28210
KS25-0942	CYSTOSCOPY AND FULGURATION OF VALVES	15500	19370	23230
KS25-0943	DECORTICATION FOR EMPYEMA	21000	26250	31500
KS25-0944	DEEP ABSCESS/MULTIPLE ABSCESS DRAINAGE	8500	10630	12750
KS25-0945	DEEP SEATED ABSCESS DRAINAGE/ L.N. BIO/ EXCISION OF TUMOR	11000	13750	16500
KS25-0946	DIAGNOSTIC THORACOSCOPY	15500	19370	23230
KS25-0947	DRESSING - LARGE (Paed. Sur.)	2200	2750	3300
KS25-0948	DRESSING - SMALL (Paed. Sur.)	1200	1500	1800
KS25-0949	DUODENO-DUODENOSTOMY	18810	23510	28210
KS25-0950	DUODENO-JEJUNOSTOMY	18810	23510	28210
KS25-0951	DUOSENAL ATRESIA	22000	27500	33000
KS25-0952	EPIGASTRIC HERNIA REPAIR	13000	16250	19500
KS25-0953	EXAMINATION UNDER ANESTHESIA	9590	11500	13800
KS25-0954	EXAMINATION UNDER SEDATION	4000	5000	6000
KS25-0955	EXCISION OF CHOLEDOCHOL CYST	30960	38730	46490
KS25-0956	EXCISION OF LARGE SUPERFICIAL TUMOUR	8500	10630	12750
KS25-0957	EXCISION OF SMALL SUPERFICIAL TUMOUR	6000	7500	9000
KS25-0958	EXOMPHALOS/GASTROSCHISIS REPAIR	30960	38730	46490
KS25-0959	EXOSTROPHY BLADDER COMPLETE REPAIR	30960	38730	46490

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-0960	EXPLORATORY LAPROTOMY	16000	20000	24000
KS25-0961	FISTULA IN ANO	10000	12500	15000
KS25-0962	FISTULECTOMY	12960	16200	19440
KS25-0963	GASTROSTOMY	13940	17420	20910
KS25-0964	HEPATIC LOBECTOMY	45840	57300	68760
KS25-0965	HYDROCEPHALUS	18610	23230	27890
KS25-0966	HYPOSPADIAS - PROXIMAL (Paed.)	19000	23750	28500
KS25-0967	HYPOSPADIAS DISTAL	17000	21250	25500
KS25-0968	HYPOSPADIAS SECOND STAGE CORRECTION	23000	28750	34500
KS25-0969	INTUSSUSCEPTION REDUCTION	20000	25000	30000
KS25-0970	JEJINOSTOMY/ILEOSTOMY	14500	18130	21750
KS25-0971	KASAI'S PORTOENTEROSTOMY	37530	46910	56290
KS25-0972	LABIAL ADHENOLYSIS	1400	1750	2100
KS25-0973	LADDS PROCEDURE AND APPENDIECTOMY	24660	30820	36990
KS25-0974	LAMINECTOMY FOR SPINA BIFIDA OCCULTA	29000	36250	43500
KS25-0975	LAPAROTOMY LADDS PROCEDURE FOR MALROTATION	19500	24380	29250
KS25-0976	LAPROTOMY AND EXCISION OF MAJOR ABDOMINAL TUMOR eg. NEUROBLASTOMA / TERATOMA	27000	33750	40500
KS25-0977	LIMITED PENNAS PROCEDURE	16290	20360	24420
KS25-0978	LIVER HYDATID	28890	36130	43350
KS25-0979	LOOP SIGMOID COLOSTOMY	17000	21250	25500
KS25-0980	LYMPH NODE BIOPSY (SUPERFICIAL)	6000	7500	9000
KS25-0981	LYMPH NODE BIOSPY (DEEP)	8000	10000	12000
KS25-0982	MEATAL DILATATION	2070	2590	3100
KS25-0983	MECKEL'S DIVERTICULECTOMY	20000	25000	30000
KS25-0984	MINOR SURGICAL PROCEDURE ANAL DILATATION	6000	7500	9000
KS25-0985	MINOR SURGICAL PROCEDURE I & D	6000	7500	9000
KS25-0986	MINOR SURGICAL PROCEDURE MEATOTOMY	6000	7500	9000
KS25-0987	MINOR SURGICAL PROCEDURE SEB. CYST	6000	7500	9000
KS25-0988	MINOR SURGICAL PROCEDURE TONGUE TIE	6000	7500	9000
KS25-0989	MINOR SURGICAL PROCEDURE URETHRAL DILATATION	6000	7500	9000
KS25-0990	MULTIPLE RESECTION AND ANASTOMOSIS	25000	31250	37500
KS25-0991	MUSCLE BIOPSY (PAED.)	5000	5000	5000
KS25-0992	NECK SINUS EXCISION	6930	8660	10390
KS25-0993	NEONATAL ESOPHAGOSTOMY & GASTROSTOMY	27900	34850	41820
KS25-0994	NEONATAL GASTROSTOMY	14500	18130	21750
KS25-0995	NEONATE HERNIA REPAIR BILATERAL	20000	25000	30000
KS25-0996	NEPHRECTOMY	23230	29060	34850
KS25-0997	NEPHRECTOMY FOR WILMS TUMOUR	23800	29780	35720
KS25-0998	NEPHROSTOMY	10100	12640	15150
KS25-0999	NEPHROURETERECTOMY	27900	34850	41820
KS25-1000	OBSTRUCTED HERNIA (PAED.)	16000	20000	24000
KS25-1001	ORCHIDECTOMY BILATERAL (PAED.)	12400	15500	18610
KS25-1002	ORCHIDECTOMY UNILATERAL (PAED.)	10850	13550	16280
KS25-1003	ORCHIDOPEXY BILATERAL (PAED.)	24000	30000	36000

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1004	ORCHIDOPEXY UNILATERAL (PAED.)	17000	21250	25500
KS25-1005	PILCATON OF DIAPHRAGM	29790	37240	44680
KS25-1006	PLEURAL TAP	2000	2500	3000
KS25-1007	PORTOENTEROSTOMY	34080	42610	51150
KS25-1008	PREPUCIAL ADHENOLYSIS	1700	2130	2550
KS25-1009	PROCEDURES UNDER FLOUROSCOPIC CONTROL - STANDBY 20% OF THE PROCEDURE	as per actuals		
KS25-1010	PSARP - COMPLETE	26000	32500	39000
KS25-1011	PUESTOWS PROCEDURE	37530	46910	56290
KS25-1012	PULL THROUGH ABDOMINOPERINEAL	28500	35630	42750
KS25-1013	PULL THROUGH PROCEDURE-DUHAMEL	33840	42300	50760
KS25-1014	PULL THROUGH PROCEDURE-SCOTT BOLEY	33840	42300	50760
KS25-1015	PULL THROUGH PROCEDURE-SWENSON	33840	42300	50760
KS25-1016	PULL THROUGH PROCEDURE-TRANSANAL	38840	48550	58260
KS25-1017	PULMONARY HYDATID	30780	38490	46190
KS25-1018	PYELOPLASTY	27000	33750	40500
KS25-1019	RAMSTEAD OPERATION FOR PYLORIC STENOSIS	20310	25410	30470
KS25-1020	RANNULA EXCISION	10000	12500	15000
KS25-1021	RECTAL BIOPSY	6000	7500	9000
KS25-1022	RECTAL POLYP EXCISION	7500	9380	11250
KS25-1023	RELEASE OF TORTICOLLIS	13500	16880	20250
KS25-1024	RELEASE TONGUE TIE V - Y PLASTY	7500	9380	11250
KS25-1025	RESECTION & ANASTAMOSIS OF INTESTINE	24000	30000	36000
KS25-1026	RIGID BRONCHOSCOPY WITH REMOVAL OF FOREIGN FOREIGN BODY	59010	70820	84970
KS25-1027	SPINA BIFIDA REPAIR - LARGE	26000	32500	39000
KS25-1028	SPINA BIFIDA REPAIR - SMALL	20000	25000	30000
KS25-1029	SPLENECTOMY AND LIENO -RENAL SHUNT	59580	74470	89370
KS25-1030	SUPRAPUBIC CYSTOLITHOTOMY (PAED.)	11800	14160	16980
KS25-1031	SUPRAPUBIC CYSTOSTOMY	7500	9370	11250
KS25-1032	SUTURING UPTO 3 SINGLE LAYER STITCH	1200	1500	1800
KS25-1033	SYNDACTYLY-COMPLEX	29790	37240	44680
KS25-1034	THIERSCH/SCLEROTHERAPY FOR RECTAL PROLAPSE	8500	10630	12750
KS25-1035	THORACOSCOPIC DECORTICATION	27900	34850	41820
KS25-1036	THORACOTOMY - CYST EXCISION	25000	31250	37500
KS25-1037	THORACOTOMY - LOBECTOMY	29000	36250	43500
KS25-1038	THORACOTOMY - PNEUMONECTOMY	29000	36250	43500
KS25-1039	THYROGLOSSAL CYST/FISTULA	19000	23750	28500
KS25-1040	TORSION TESTIS WITH CONTRALETRAL FIXATION	19000	23750	28500
KS25-1041	TRANSVERSE COLOSTOMY (LOOP)	17000	21250	25500
KS25-1042	UMBILICAL EX PLORATION	6930	8660	10390
KS25-1043	UMBILICAL HERNIA REPAIR	14000	17500	21000
KS25-1044	UNILATERAL HERNIOTOMY	15000	18750	22500
KS25-1045	URETERIC REIMPLANTATION UNILATERAL	23230	29060	34850
KS25-1046	URETEROSTOMY - BILATERAL	21170	26460	31780
KS25-1047	URETEROSTOMY - UNILATERAL	16360	20440	24530

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1048	URETHRAL FISTULA	14500	18130	21750
KS25-1049	USG GUIDED LIVER ABSCESS DRAINAGE UNDER SEDATION	10500	13130	15750
KS25-1050	USG GUIDED LIVER PIGTAIL INSERTION	13260	15930	19120
KS25-1051	VAGINOPLASTY/CLITOROPLASTY OF CAH	45810	57260	68710
KS25-1052	VARICOCOELE (Paed. Sur.)	14000	17500	21000
KS25-1053	VENESECTION	1880	2320	2790
KS25-1054	VESICOSTOMY	13940	17420	20910
KS25-1055	WILMS TUMOUR EXCISION/NEUROBLASTOMA EXCISION	27900	34850	41820
KS25-1056	YOUNG-DES BLADDER NECK REPAIR	29790	37240	44680

NOTE : All Paediatric (age more than 1 month) procedures will be charged 20% lower than infants and children.

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
J. PULMONARY & MEDIASTINAL				
KS25-1057	BEDSIDE BRONCHOSCOPY	11000	13750	16490
KS25-1058	BRONCHIAL STENTING	24050	30060	36070
KS25-1059	BRONCHOSCOPIC INTUBATION	11550	14430	17310
KS25-1060	BRONCHOSCOPY WITH BIOPSY	10190	12760	15330
KS25-1061	BRONCHOSCOPY WITH WASHING	9930	12420	14880
KS25-1062	BRONCHOSCOPY WITH WASHING & BIOPSY	11550	14430	17310
KS25-1063	BRONCHOSCOPY WITH WASHING & TBLx (TRANSBRONCHIAL LUNG BIOPSY)	11550	14430	17310
KS25-1064	BRONCHOSCOPY WITH WASHING & TBNAC (TRANSBRONCHIAL NEEDLE ASPIRATION CYTOLOGY) (Ne	11550	14430	17310
KS25-1065	BRONCHOSCOPY WITH WASHING/BIOPSY/TBNAC (Needle cost extra)	11550	14430	17310
KS25-1066	CERVICAL SYMPATHECTOMY	26870	33570	40270
KS25-1067	CHEST ASPIRATION - DIAGNOSTIC	3220	4030	4830
KS25-1068	CHEST ASPIRATION - THERAPEUTIC	3940	4910	5920
KS25-1069	CHEST ASPIRATION & PLEURAL BIOPSY & LUNG BIOPSY (NEEDLE)	6380	7950	9540
KS25-1070	CHEST WALL RECONSTRUCTION	65450	77000	92400
KS25-1071	ENDOBRONCHIAL ELECTROCAULERY	18040	22550	27040
KS25-1072	ENDOBRONCHIAL ULTRASOUND BRONCHOSCOPY (EBUS)	32340	32340	32340
KS25-1073	EXCISION OF CERVICAL RIB	28870	36070	43280
KS25-1074	GLUE INSERTION FOR BPF (Consumables cost extra)	15010	18780	22550
KS25-1075	GLUE INSERTION FOR HAEMOPTYSIS (Consumables cost extra)	12020	15010	18040
KS25-1076	INTERCOSTAL TUBE DRAINAGE (Consumables cost extra)	8700	10890	13050
KS25-1077	MEDIASTINAL L.N. BIOPSY	14850	18560	22270
KS25-1078	OPEN LUNG BIOPSY	12200	15220	18270
KS25-1079	PERICARDIAL ASPIRATION	7260	9070	10890
KS25-1080	PERICARDIAL TUBE DRAINAGE	12440	15560	18680
KS25-1081	PLEURODESIS	9860	12310	14780
KS25-1082	REPAIR OF RIB FRACTURE	46750	55000	66000
KS25-1083	RIB RESECTION & DRAINAGE	12880	16080	19340
KS25-1084	SCALENE NODE BIOPSY	7520	9390	11290
KS25-1085	SCALENOTOMY FOR SCALENOUS SYNDROME	11320	14120	16960
KS25-1086	THORACOPLASTY & APICOLYSIS	30000	37500	45000
KS25-1087	THORACOSTOMA	37400	44000	52800
KS25-1088	THYMECTOMY OR MEDIASTINAL MASS EXCISION	40000	50000	60000
KS25-1089	TRACHEAL/ BRONCHIAL DILATATION	14970	18710	22450
KS25-1090	VATS BULLECTOMY	37400	44000	52800
KS25-1091	VATS DECORTICATION	56100	66000	79200
KS25-1092	VATS DIAPHRAGM REPAIR/PLICATION	37400	44000	52800
KS25-1093	VATS LOBECTOMY	56100	66000	79200
KS25-1094	VATS MEDIASTINAL MASS EXCISION	46750	55000	66000
KS25-1095	VATS REMOVAL OF FOREIGN BODY	37400	44000	52800
KS25-1096	VATS SLEEVE LOBECTOMY	60770	71500	85800
KS25-1097	VATS SUBLOBAR RESECTION (ANATOMICAL)	56100	66000	79200
KS25-1098	VATS SUBLOBAR RESECTION (NON-ANATOMICAL)	46750	55000	66000
KS25-1099	VATS THYMECTOMY	46750	55000	66000

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
I) OESOPHAGUS				
KS25-1100	ACHALASIA OESOPHAGO CARDIOMYOTOMY	28920	36150	43410
KS25-1101	CONGENITAL OESOPHAGEAL ATRESIA/T.O FISTUAL	33070	41330	49590
KS25-1102	LIGATION OF OESOPHAGEAL VARICES	29790	37210	44640
KS25-1103	OPEN REMOVAL OF F.B. OESOPHAGUS WITH THORACTOMY	29990	37480	45000
KS25-1104	REPAIR OF HIATUS HERNIA	28920	36150	43410
KS25-1105	RESECTION OF OESOPHAGUS FOR CANCER COLON/TRANSPLANT	45000	56250	67500

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
II) DIAPHRAGM				
KS25-1106	REMOVAL OF F.B. OESOPHAGUS BY OESOPHAGOSCOPY	10410	12960	15560
KS25-1107	REPAIR OF DIAPHRAGMATIC HERNIA	40000	50000	60000
KS25-1108	REPAIR OF OESOPHAGEL TEAR	37140	46430	55690
KS25-1109	REPAIR OF TRAUMATIC DIAPHRAGMATIC RUPTURE (VATS)	40000	50000	60000
K. VASCULAR PROCEDURE				
KS25-1110	ARTERIAL ENDARTERECTOMY - CAROTID	33530	41900	50280
KS25-1111	ARTERIAL ENDARTERECTOMY - ILIAC	26800	33490	40180
KS25-1112	ARTERIAL ENDARTERECTOMY - OTHERS	26800	33490	40180
KS25-1113	ARTERIAL OR VENOUS BY PASS (INCLUDING A-V FISTULA - FOUR ANASTOMOSIS	40230	50270	60310
KS25-1114	ARTERIAL OR VENOUS BY PASS (INCLUDING A-V FISTULA - ONE ANASTOMOSIS	16320	20380	24460
KS25-1115	ARTERIAL OR VENOUS BY PASS (INCLUDING A-V FISTULA - THREE ANASTOMOSIS	33530	41900	50280
KS25-1116	ARTERIAL OR VENOUS BY PASS (INCLUDING A-V FISTULA - TWO ANASTOMOSIS	26800	33490	40180
KS25-1117	BRONCHOGRAM - BILATERAL	8030	10000	12020
KS25-1118	BRONCHOGRAM - UNILATERAL	5730	7140	8550
KS25-1119	BRONCHOGRAM - VIA BRONCHOSCOPY	10300	12880	15450
KS25-1120	BRONCHOSCOPY	8540	10690	12810
KS25-1121	BRONCHOSCOPY FOR REMOVAL OF F.B	10300	12880	15450
KS25-1122	CAROTID BY PASS GRAFT	37140	46430	55690
KS25-1123	CAROTID ENDARTECTOMY - BILATERAL	37140	46430	55690
KS25-1124	CAROTID ENDARTECTOMY - UNILATERAL	29990	37480	45000
KS25-1125	COMBINE BRONCHOSCOPY & OESOPHAGOSCOPY	12920	16170	19370
KS25-1126	CONGENTIAL A.V. FISTULA	31030	38790	46560
KS25-1127	EXCISION OF CAROTID BODY TUMOUR	25700	32130	38570
KS25-1128	EXCISION OF CAROTID BODY WITH USE OF SHUNT	37140	46430	55690
KS25-1129	EXCISION OF VARICOSE VEINS	14850	18560	22270
KS25-1130	EXCISION OF VARICOSE VEINS - COMBINED	18550	23180	27820
KS25-1131	EXCISION OF VARICOSE VEINS - LONG	14510	18110	21740
KS25-1132	EXCISION OF VARICOSE VEINS - SHORT SAPHENOUS	10410	12960	15560
KS25-1133	EXCISION OF VARICOSE VEINS - VARICOSE VEINS (incompetent Perforator)	11450	14300	17130
KS25-1134	FEMORAL CROSSED LEG GRAFT	31030	38790	46560
KS25-1135	FEMORAL EMBOLECTOMY - BILATERAL	31030	38790	46560
KS25-1136	FEMORAL EMBOLECTOMY - UNILATERAL	20640	25840	30990
KS25-1137	FISTULA - BRACHIAL	15650	19550	23430
KS25-1138	FISTULA - WRIST	13130	16410	19690
KS25-1139	INJURY A/V DIRECT REPAIR	17860	22340	26800
KS25-1140	INJURY A/V PROSTHETIC GRAFT	26830	33540	40250
KS25-1141	INJURY A/V VEIN GRAFT	32160	40230	48250
KS25-1142	INJURY A/V VEIN PATCH	21460	26800	32140
KS25-1143	IVC FILTER	26800	33490	40180
KS25-1144	LIENO - RENAL SHUNT	37140	46430	55690
KS25-1145	MANAGEMENT OF POPLITEAL ENTRAPMENT	20640	25840	30990
KS25-1146	OESOPHAGEAL DILATATION	10410	12960	15560
KS25-1147	OESOPHAGOSCOPY FOR REMOVAL OF F.B	10300	12880	15450

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1148	PERIPHERAL VASCULAR INJURY REPAIR - DIRECT REPAIR	26740	33470	40140
KS25-1149	PERIPHERAL VASCULAR INJURY REPAIR - GRAFT	33070	41330	49590
KS25-1150	SHUNT FOR HEMODIALYSIS	11220	14010	16810
KS25-1151	SUTURE/STAPLE PIN REMOVAL	1520	1880	2280
KS25-1152	SYMPATHECTOMY	21460	26800	32140
KS25-1153	THORACOSCOPIC PROCEDURE - DIAGNOSTIC	18550	23180	27820
KS25-1154	THORACOSCOPIC PROCEDURE - THERAPEUTIC	37140	46430	55690
KS25-1155	THORACOSCOPIC PROCEDURE - VATS DECORTICATION	33760	42210	50630
KS25-1156	VEIN GRAFT PROCEDURE CHARGE	17890	17890	17890
KS25-1157	VENOUS THROMBECTOMY	26800	33490	40180

Note : Vein graft charges extra .

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
L. PLASTIC SURGERY PROCEDURES				
KS25-1158	ABDOMINOPLASTY	19860	24820	29800
KS25-1159	ANEURYSM EXCISION (Aneurysmectomy) - LARGE	15600	19520	23400
KS25-1160	ANEURYSM EXCISION (Aneurysmectomy) - MEDIUM	15090	18850	22630
KS25-1161	ANEURYSM EXCISION (Aneurysmectomy) - SMALL	13000	16250	19520
KS25-1162	ANTERIOR REPAIR/ANTERIOR PALATE	11600	14480	17400
KS25-1163	AVULSION INJURIES - SCALP	14840	18550	22270
KS25-1164	AVULSION INJURIES LIMBS - LARGE	14840	18550	22270
KS25-1165	AVULSION INJURIES LIMBS - MEDIUM	9830	12260	14700
KS25-1166	AVULSION INJURIES LIMBS - SMALL	6690	8360	10060
KS25-1167	AVULSION INJURY SCROTUM / PENIS	14840	18550	22270
KS25-1168	BAGGY EYELIDS, ENTROPION	14110	17630	21160
KS25-1169	BED-SORE FLAPS	18100	22620	27160
KS25-1170	BENIGN CONDITION EXCISION - LARGE	14120	17650	21170
KS25-1171	BENIGN CONDITION EXCISION - SMALL	6360	7960	9540
KS25-1172	BENIGN CONDITION EXCISION FACE - LARGE	14400	17280	20750
KS25-1173	BENIGN CONDITION EXCISION FACE - MEDIUM	11370	13640	16370
KS25-1174	BENIGN CONDITION EXCISION MEDIUM	8930	11170	13430
KS25-1175	BENIGN CONDITION FACE	9430	11790	14140
KS25-1176	BENIGN CONDITION OTHER THAN FACE	6830	8530	10200
KS25-1177	BONE GRAFT A.O FIXATION / PLATING	16620	20770	24940
KS25-1178	BONE GRAFT HARVESTING	11710	14060	15470
KS25-1179	BOTOX INJECTION PER AREA	4810	6010	7240
KS25-1180	BRACHIAL PLEXUS REPAIR EACH TRUNK/ CORD	31850	38210	45840
KS25-1181	BREAST AUGMENTATION	18490	23090	27730
KS25-1182	BREAST LIFT	26940	33660	40390
KS25-1183	BREAST NIPPLE RECONSTRUCTION	10340	12900	15470
KS25-1184	BREAST RECONSTRUCTION	47250	59050	70840
KS25-1185	BREAST REDUCTION	22310	27850	33450
KS25-1186	BURNS EXCISION - LARGE	23120	28900	34680
KS25-1187	BURNS EXCISION - MEDIUM	16620	20770	24940
KS25-1188	BURNS EXCISION - SMALL	13210	16510	19830
KS25-1189	CARTILAGE GRAFT TO EAR, NOSE, RIB	13890	17350	20810
KS25-1190	CARTILAGE HARVEST EAR	11760	14690	17630
KS25-1191	CARTILAGE HARVEST RIB	17040	21300	25560
KS25-1192	CHEEK AGUMENTATION	28280	35350	42410
KS25-1193	CHIN AUGMENTATION	16500	20630	24760
KS25-1194	CLEFT LIP : BILATERAL - COMPLETE	18170	22700	27230
KS25-1195	CLEFT LIP : BILATERAL - INCOMPLETE	16620	20770	24940
KS25-1196	CLEFT LIP : UNILATERAL - COMPLETE	14840	18550	22270
KS25-1197	CLEFT LIP : UNILATERAL - INCOMPLETE	12850	16080	19290
KS25-1198	CLEFT LIP AND PALATE SECONDARY CORRECTION MAJOR	17900	22340	26810
KS25-1199	CLEFT LIP AND PALATE SECONDARY CORRECTION MEDIUM	15130	18920	22700
KS25-1200	CLEFT LIP AND PALATE SECONDARY CORRECTION MINOR	12400	15470	18570

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1201	CLEFT LIP NOSE DEFORMITY	20630	25790	30940
KS25-1202	CLEFT PALATE - INCOMPLETE	17370	21710	26030
KS25-1203	CLEFT PALATE - COMPLETE	19860	24820	29800
KS25-1204	COMPLEX MICROVASCULAR REPAIR (ARTERY, NERVE & TENDON REPAIR INCLUDING WOUND DEBRIDEMENT)	51490	64360	77240
KS25-1205	COMPLICATED SCAR FACE	16500	20630	24760
KS25-1206	COMPLICATED WOUND FACE	21420	26760	32110
KS25-1207	COMPOSITE GRAFT	21050	26300	31550
KS25-1208	CONTRACTURE - LARGE	21530	26900	32290
KS25-1209	CONTRACTURE - MEDIUM	13870	17330	20780
KS25-1210	CONTRACTURE - SMALL	9200	11490	13830
KS25-1211	CORRECTIVE OSTEOTOMY	12090	15110	18140
KS25-1212	COSMETIC CORRECTION OF DEFORMITIES OF - CHEEK	13210	16510	19830
KS25-1213	COSMETIC CORRECTION OF DEFORMITIES OF - EYE BROWS	13210	16510	19830
KS25-1214	COSMETIC CORRECTION OF DEFORMITIES OF - LIP	13210	16510	19830
KS25-1215	COSMETIC PENILE SURGERY	37770	47230	56670
KS25-1216	COSMETIC RHINOPLASTY	22410	28010	33590
KS25-1217	DEFATTING FLAP	13060	16350	19600
KS25-1218	DERMABRASION FACE	16050	20060	24070
KS25-1219	DERMAROLLER 10X10 CM AREA	7850	9830	11760
KS25-1220	DIVERICATION RECTI	30330	37920	45500
KS25-1221	DRESSING CHARGES (NON-BURN) - LARGE	2270	2270	2270
KS25-1222	DRESSING CHARGES (NON-BURN) - MEDIUM	1710	1710	1710
KS25-1223	DRESSING CHARGES (NON-BURN) - SMALL	890	890	890
KS25-1224	DRESSING CHARGES (NON-BURN) - V. LARGE	3270	3270	3270
KS25-1225	DRESSING CHARGES BURNS - EXTENSIVE (50% AND ABOVE)	5160	5160	5160
KS25-1226	DRESSING CHARGES BURNS - MAJOR (30% TO 50%)	4190	4190	4190
KS25-1227	DRESSING CHARGES BURNS - MEDIUM (10% TO 30%)	2750	2750	2750
KS25-1228	DRESSING CHARGES BURNS - MINOR (5% TO 10%)	1770	1770	1770
KS25-1229	DRESSING CHARGES BURNS - V. MINOR (UPTO 5%)	910	910	910
KS25-1230	EAR DEFORMITY, BAT EARS	15640	19560	23460
KS25-1231	EAR LOBULE REPAIR - BOTH SIDES	5250	6560	7870
KS25-1232	EAR LOBULE REPAIR - SINGLE	3310	4120	4960
KS25-1233	ECTOPIC BLADDER RECONSTRUCTION	26430	33030	39620
KS25-1234	ELEPHANTIASIS LIMB	19150	23920	28720
KS25-1235	ELEPHANTIASIS SCROTUM	19860	24820	29800
KS25-1236	EPICANTHUS (Plastic Sur.)	16490	20620	24750
KS25-1237	EPISPADIAS GENITALIA	18140	22650	27200
KS25-1238	ESCHAROTOMY	10570	13200	15860
KS25-1239	EXCISION KELOID - LARGE	14860	17850	21400
KS25-1240	EXCISION KELOID - MEDIUM	11370	13640	16370
KS25-1241	EXCISION KELOID - SMALL	6830	8170	9840
KS25-1242	EXPANSION EACH TIME	2040	2040	2040
KS25-1243	EYE LID RECONSTRUCTION	15240	19030	22840
KS25-1244	EYE LID WEDGE RESECTION & RECONSTRUCTION	11600	14480	17400

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1245	FACE LIFT RHYTEDECTOMY	42210	52780	63330
KS25-1246	FACE SCAR SIMPLE	8280	10350	12420
KS25-1247	FACE SCARS COMPLICATED OR LARGE	17220	21530	25830
KS25-1248	FACIAL BONES - CLOSE FRACTURE NOSE	8770	10960	13170
KS25-1249	FACIAL BONES - CLOSE REDUCTION MALAR OR MANDIBLE OR MAXILLA	11600	14480	17400
KS25-1250	FACIAL BONES - COMPOUND FRACTURE NOSE	10080	12580	15090
KS25-1251	FACIAL BONES - MALAR FRACTURE INTERNAL FRACTURE	10080	12580	15090
KS25-1252	FACIAL BONES - MALAR FRACTURE INTERNAL FIXATION	10080	12580	15090
KS25-1253	FACIAL BONES - MANDIBLE FRACTURE INTERNAL FIXATION	11880	14850	17780
KS25-1254	FACIAL BONES - MAXILLARY FACTURE INTERNAL FIXATION	19780	24740	29670
KS25-1255	FACIAL BONES - PAN FRACTURE	32110	40120	48130
KS25-1256	FACIAL PARALYSIS	17220	21530	25830
KS25-1257	FACIOTOMY	13210	16510	19830
KS25-1258	FASCIOCUTANEOUS FLAP 1ST INSET/ FINAL INSET	14060	17550	21060
KS25-1259	FASCIOCUTANEOUS FLAP DELAY	10060	12550	15070
KS25-1260	FASCIOCUTANEOUS FLAP DETACHMENT	10060	12550	15070
KS25-1261	FASCIOCUTANEOUS FLAP MEDIUM	13740	17180	20630
KS25-1262	FASCIOCUTANEOUS FLAP PEDICLE RETURN	7150	7860	8580
KS25-1263	FASCIOCUTANEOUS FLAPS - LARGE	19310	24130	28960
KS25-1264	FASCIOCUTANEOUS FLAPS - SMALL	16620	20770	24940
KS25-1265	FASCIOTOMY LARGE	12090	15110	18140
KS25-1266	FASCIOTOMY MEDIUM	11290	14110	16930
KS25-1267	FASCIOTOMY SMALL	8570	10720	12860
KS25-1268	FISTULA CLOSURE	9340	11650	13980
KS25-1269	FOREHEAD RHINOPLASTY	15860	19790	23760
KS25-1270	FRACTURE FRONTAL BONES ORIF (PLATING)	13060	16350	19600
KS25-1271	FRACTURE MANDIBLE ORIF (PLATING)	16220	20290	24340
KS25-1272	FRACTURE MAXILLA ORIF (PLATING)	17610	22020	26430
KS25-1273	FRACTURE NASAL BONES CLOSED REDUCTION	7990	9960	11970
KS25-1274	FRACTURE NASAL BONES ORIF (PLATING)	13060	16350	19600
KS25-1275	FRACTURE ORBIT ORIF (PLATING)	13740	17180	20630
KS25-1276	FRACTURE ZYGOMA ORIF (PLANTING)	18980	23740	28480
KS25-1277	FULL THICKNESS SKIN GRAFT LARGE	25120	31400	37700
KS25-1278	FULL THICKNESS SKIN GRAFT MEDIUM	18860	23580	28290
KS25-1279	FULL THICKNESS SKIN GRAFT SMALL	14800	18480	22190
KS25-1280	GYNAECOMASTIA REDUCTION BOTH SIDE	31470	34620	38070
KS25-1281	GYNAECOMASTIA REDUCTION ONE SIDE	19270	24070	28890
KS25-1282	HAEMANGIOMA - EXCISION - A.V. FISTULA	14840	18550	22270
KS25-1283	HAEMANGIOMA - EXCISION - LARGE	16620	20770	24940
KS25-1284	HAEMANGIOMA - EXCISION - MEDIUM	13210	16510	19830
KS25-1285	HAEMANGIOMA - EXCISION - SMALL	10080	12580	15090
KS25-1286	HAEMANGIOMA - INJECTIONOF SCLEROSING AGENT	2630	3300	3970
KS25-1287	HAND SURGERY - BONY FIXATION	14210	17760	21310
KS25-1288	HAND SURGERY - CARPEL TUNNEL SYNDROME	6870	8580	10300

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1289	HAND SURGERY - FINGER (UPTO 2) CRUSH INJURY	9010	11250	13480
KS25-1290	HAND SURGERY - FINGER MORE THAN 2 (CRUSH INJURY)	12710	15890	19060
KS25-1291	HAND SURGERY - FINGER TIP INJURY	4620	5720	6880
KS25-1292	HAND SURGERY - MAJOR HAND INJURY	14630	18280	21920
KS25-1293	HAND SURGERY - REPAIR & GRAFT	5710	7140	8570
KS25-1294	HAND SURGERY - REPAIR WITH FLAP	6870	8580	10300
KS25-1295	HAND SURGERY - SYNDACTLY MULTIPLE	14840	18550	22270
KS25-1296	HAND SURGERY - SYNDACTLY SINGLE	13340	16660	20010
KS25-1297	HAND SURGERY - TENDON/NERVE REPAIR	13720	17160	20590
KS25-1298	HAND SURGERY BIFID THUMB	18850	23570	28280
KS25-1299	HAND SURGERY CLEFT HAND	24760	30940	37150
KS25-1300	HAND SURGERY EXTERNAL FIXATOR APPLICATION	13060	16350	19600
KS25-1301	HAND SURGERY EXTERNAL FIXATOR REMOVAL	4810	6010	7240
KS25-1302	HAND SURGERY EXTRA DIGIT	6560	8190	9850
KS25-1303	HAND SURGERY NAIL BED REPAIR	7350	9190	11040
KS25-1304	HAND SURGERY PLATING SMALL BONES	10340	12900	15470
KS25-1305	HAND SURGERY POLLICISATION	34390	42970	51590
KS25-1306	HAND SURGERY POLYDACTYLY	11690	14620	17540
KS25-1307	HERNIA INCISIONAL	13870	17330	20780
KS25-1308	HYPOSPADIAS - CHORDE CORRECTION - (1st Stage)	11460	14330	17160
KS25-1309	HYPOSPADIAS REPAIR (A SINGLE STAGE)	20500	25620	30750
KS25-1310	INJECTION KELOID - LARGE	1850	2320	2780
KS25-1311	INJECTION KELOID - SMALL.	1320	1640	1990
KS25-1312	INTERMAXILLARY FIXATION APPLICATION	6880	8590	10340
KS25-1313	INTERMAXILLARY FIXATION REMOVAL	3440	4300	5160
KS25-1314	JESS FIXATOR APPLICATION	16810	21000	25210
KS25-1315	LACERATED WOUND - FACE SIMPLE	8050	10070	12070
KS25-1316	LACERATED WOUND - FINGER SINGLE	4890	6100	7300
KS25-1317	LACERATED WOUND REPAIR FACE (MEDIUM)	8760	9620	12380
KS25-1318	LACERATED WOUND WITH SKIN GRAFT	10590	13210	15870
KS25-1319	LACERATION (OTHER THAN FACE) - LARGE	10720	13430	16110
KS25-1320	LACERATION (OTHER THAN FACE) - MEDIUM	9300	11880	14440
KS25-1321	LACERATION (OTHER THAN FACE) - SMALL	8320	10400	12470
KS25-1322	LARGE / MULTIPLE WOUNDS FACE	14210	17760	21310
KS25-1323	LIMB MAIN VEIN ANASTOMOSIS	37150	44580	53510
KS25-1324	LIPOINJECTON MAJOR	34390	42970	51590
KS25-1325	LIPOINJECTON MINOR	20630	25790	30940
KS25-1326	LIPOSTEM CELL TRANSFER	38500	48130	57780
KS25-1327	LIPOSUCTION - LARGE	45350	56680	68000
KS25-1328	LIPOSUCTION - LIPECTOMY COSMETIC	19780	24740	29670
KS25-1329	LIPOSUCTION - MEDIUM	39330	49160	58980
KS25-1330	LIPOSUCTION - SMALL	26230	32770	39330
KS25-1331	LOBULE TRANSPOSITION	14840	18550	22270
KS25-1332	LOBULOPLASTY BOTH EARS	11370	13640	16370

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1333	LOBULOPLASTY EACH EAR	6060	7280	8740
KS25-1334	LOCAL FLAPS - BILATERAL	13890	17350	20810
KS25-1335	LOCAL FLAPS - UNILATERAL	9010	11250	13480
KS25-1336	LOCAL FLAPS - WITH GRAFT	15690	19610	23560
KS25-1337	LUMP EXCISION LARGE WITH COVER	28280	35340	42410
KS25-1338	LUMP EXCISION MEDIUM WITH COVER	18930	23660	28390
KS25-1339	LUMP EXCISION SMALL WITH COVER	14690	18370	22040
KS25-1340	MEATAL STENOSIS / TONGUE TIE	3030	3770	4530
KS25-1341	MEATUS RECONSTRUCTION	16490	20620	24750
KS25-1342	MICRO FUNCTIONAL MUSCLE TRANSFER	48130	60190	72240
KS25-1343	MICRO NERVE DECOMPRESSION	23370	29230	35100
KS25-1344	MICRO RECANALISATION VAS	30270	37820	45400
KS25-1345	MICRO SURGERY - FREE FLAP	47250	59050	70840
KS25-1346	MICRO SURGERY - MICRO VASOVASOTOMY	26450	33040	39630
KS25-1347	MICRO SURGERY - MICRONEURAL REPAIR	31630	39500	47390
KS25-1348	MICRO SURGERY - REPLANTATION OF A DIGIT	41250	51540	61860
KS25-1349	MICRO SURGERY - REPLANTATION OF MORE THAN ONE DIGIT / LIMB	57650	72050	86430
KS25-1350	MICRO SURGERY - REVASCULARISATION OF DIGIT	33020	41270	49510
KS25-1351	MICRO SURGERY - REVASCULARISATION OF LIMB / MICRO NEURAL GRAFT	39700	49630	59560
KS25-1352	MICROHAIR TRANSPLANT (Per Graft)	250	290	330
KS25-1353	MICRONEURAL REPAIR, MICRO VASCULAR REPAIR, WOUND DEBRIDEMENT AND REPAIR	30950	36410	43690
KS25-1354	MICRONEURAL REPAIR, WOUND DEBRIDEMENT REPAIR	25090	29530	35440
KS25-1355	MICRONEUROLYSIS	24760	30940	37150
KS25-1356	MICRONEUROTISATION	39900	49870	59860
KS25-1357	MICROPERFORATOR FLAP	30270	37820	45400
KS25-1358	MICROSURGERY BRACHIAL PLEXUS REPAIR	48130	60190	72240
KS25-1359	MICROVASCULAR OSTEOCUTANEOUS FLAP	48130	60190	72240
KS25-1360	MICROVASCULAR REPAIR	17690	20810	24970
KS25-1361	MICROVASCULAR REPAIR EACH ARTERY	26610	33270	39920
KS25-1362	MICROVASCULAR REPAIR WITH GRAFT	33220	41530	49830
KS25-1363	MUSCLE FLAP WITH SKIN GRAFT	22020	27520	33030
KS25-1364	MYOCUTANEOUS/MUSCLE FLAPS - LARGE	19780	24740	29670
KS25-1365	MYOCUTANEOUS/MUSCLE FLAPS - SMALL	16490	20620	24750
KS25-1366	NASAL TIP CORRECTION	11970	14930	17930
KS25-1367	NEUROVASCULAR INLAND FLAP	39900	49870	59860
KS25-1368	OTHER AREAS WOUNDS	9000	11220	13470
KS25-1369	PEDICLE FLAP (DELAY)	8350	10420	12540
KS25-1370	PEDICLE GRAFT OR FLAP - LARGE	16620	20770	24940
KS25-1371	PEDICLE GRAFT OR FLAP - SMALL	13340	16660	20010
KS25-1372	PEDICLE GRAFT OR FLAP - MEDIUM	15030	18310	22170
KS25-1373	POLLIAZATION & ISLAND FLAP	19860	24820	29800
KS25-1374	PORTWING STAINS NAEVI FACE (EXCISION & REPAIR) - LARGE	23120	28900	34680
KS25-1375	PORTWING STAINS NAEVI FACE (EXCISION & REPAIR) - MEDIUM	16620	20770	24940
KS25-1376	PORTWING STAINS NAEVI FACE (EXCISION & REPAIR) - SMALL	13210	16510	19830

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1377	PTOSIS (Plastic Sur.)	11970	14930	17930
KS25-1378	PUTING STORED GRAFT	4000	5000	6000
KS25-1379	RECONSTRUCTION LIP LOSS	26130	32670	39200
KS25-1380	RECONSTRUCTION PINNA EACH STAGE	16490	20620	24750
KS25-1381	RECONSTRUCTION URETHRA - 2nd Stage	15390	19250	23090
KS25-1382	RECONSTRUCTIVE RHINOPLASTY	22410	28010	33590
KS25-1383	RECONSTRUCTIVE SEPTO-RHINOPLASTY	25320	31650	37970
KS25-1384	REPAIR COLOBOMA	17100	21380	25660
KS25-1385	SCAR FACE LARGE	13740	17180	20630
KS25-1386	SCAR FACE MEDIUM	10340	12900	15470
KS25-1387	SCAR FACE SMALL	6880	8590	10340
KS25-1388	SCARS (OTHER THAN FACE)	14390	17990	21570
KS25-1389	SECONDARY CLEFT LIP	16620	20770	24940
KS25-1390	SECONDARY CORRECTION (LIP)	13340	16660	20010
KS25-1391	SINGLE STAGE RECONSTRUCTION	19860	24820	29800
KS25-1392	SKIN GRAFTING - LARGE	14410	18020	21630
KS25-1393	SKIN GRAFTING - MEDIUM	11270	14090	16910
KS25-1394	SKIN GRAFTING - SMALL	8040	10060	12060
KS25-1395	SOCKET RECONSTRUCTION	16490	20620	24750
KS25-1396	SURGICIAL TOILET - DESLOUGHING	7290	9140	10930
KS25-1397	SURGICIAL TOILET - REMOVAL OF ESCHAR	10570	13200	15860
KS25-1398	T.M. JOINT ANKYLOSIS	18890	23590	28310
KS25-1399	TENDON GRAFTING	14440	18040	21660
KS25-1400	TENDON REPAIR EACH TENDON	12870	15440	18550
KS25-1401	TENDON REPAIR MULTIPLE	17400	21750	26060
KS25-1402	TENDON TRANSFER	24760	30940	37150
KS25-1403	TISSUE EXPANDER EACH	20460	25550	30640
KS25-1404	TISSUE EXPANDER FILLING EACH SITTING	2280	2730	3280
KS25-1405	TISSUE EXPANDER INSERTION	24100	30140	36150
KS25-1406	TISSUE EXPANDER REMOVAL	22320	26790	32150
KS25-1407	TISSUE EXPANDER REMOVAL & FLAP COVER	37150	44580	53510
KS25-1408	UMBILICOPLASTY	21840	27300	32760
KS25-1409	VAGINOPLASTY	19860	24820	29800
KS25-1410	VASER LIPOSUCTION (Equipment Charges Extra)	21600	27000	32380
KS25-1411	VOLKMANNS ISCHEMIA SURGERY OR DEUPUTYTRENS DISEASE EACH FINGER	27300	32760	39310
KS25-1412	VOLKMANNS ISCHEMIA SURGERY OR DEUPUTYTRENS DISEASE PALM	27300	32760	39310
KS25-1413	WOUND DEBRIDEMENT - LARGE	19860	24820	29800
KS25-1414	WOUND DEBRIDEMENT - MEDIUM	14260	17850	21400
KS25-1415	WOUND DEBRIDEMENT - SMALL	11340	14170	17010
KS25-1416	WOUND DEBRIDEMENT AND REPAIR (LARGE)	20220	23770	28540
KS25-1417	WOUND DEBRIDEMENT AND REPAIR (MEDIUM)	16110	18940	22740
KS25-1418	WOUND DEBRIDEMENT AND REPAIR (SMALL)	13270	15600	18720
KS25-1419	WOUND DEBRIDEMENT AND REPAIR (VERY SMALL)	9400	11050	13270
KS25-1420	WOUND DEBRIDEMENT, REPAIR AND MULTIPLE TENDON REPAIR	22110	26010	31210

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1421	WOUND DEBRIDEMENT, REPAIR AND SINGLE TENDON REPAIR	18800	22110	26520
KS25-1422	WOUND SURGICAL TOILET - SMALL	10810	13500	16210
KS25-1423	WOUND SURGICAL TOILET LARGE	18920	23650	28380
KS25-1424	WOUND SURGICAL TOILET MEDIUM	13590	16990	20380
KS25-1425	Z - PLASTY - LARGE	14830	18500	22210
KS25-1426	Z - PLASTY - MEDIUM	11600	14480	17400
KS25-1427	Z - PLASTY - SMALL	8280	10350	12420
M. LASER SURGERY				
KS25-1428	DIABETIC FOOT - MAJOR	9400		
KS25-1429	DIABETIC FOOT - SMALL	4570		
COSMETIC PROCEDURES				
KS25-1430	CHEMICAL PEEL	2170		
KS25-1431	CORNS	2880		
KS25-1432	FACE REJUVENATION	3000		
KS25-1433	HAIR REMOVAL AXILLA	4810		
KS25-1434	HAIR REMOVAL CHIN	2410		
KS25-1435	HAIR REMOVAL FOREARM	7240		
KS25-1436	HAIR REMOVAL LEG	9620		
KS25-1437	HAIR REMOVAL NECK	4810		
KS25-1438	HAIR REMOVAL UPPER LIP	2410		
KS25-1439	WARTS	2880		

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
N. OPHTHALMOLOGY				
KS25-1440	A SCAN BIOMETRY(IOL POWER CALCULATION)	1100	1100	1100
KS25-1441	ANTERIOR CHAMBER ASSESSMENT HD OCT	1430	1430	1430
KS25-1442	APPLANATION TENSION CHECK UP	250	250	250
KS25-1443	B SCAN (PER EYE)	2200	2200	2200
KS25-1444	BANDAGE CONTACT LENS	1100	1100	1100
KS25-1445	CHALAZION EXCISION UNDER LA	6800	6800	6800
KS25-1446	CHALAZION MULTIPLE/ EYE	4210	5280	6350
KS25-1447	CHALAZION SINGLE/WHART/SEBACEOUS CYST/ EYE	5610	5610	5610
KS25-1448	CONCRETION REMOVAL-BOTH EYE	2680	3220	3880
KS25-1449	CONCRETION REMOVAL-ONE EYE	1780	2140	2580
KS25-1450	CONJ. FLAPPING	9230	11540	13850
KS25-1451	CONJUNCTIVAL TEAR, WOUND REPAIR	10040	12570	15090
KS25-1452	CONTACT LENS FITTING (AS PER ACTUAL USE)	as per actuals		
KS25-1453	CORNEAL FOREIGN BODY REMOVAL SUPERFICIAL / DEEP - UNDER GA	5980	7480	8990
KS25-1454	CORNEAL FOREIGN BODY REMOVAL SUPERFICIAL / DEEP - UNDER LA	1500	1870	2240
KS25-1455	CORNEAL GLUE + BCC	6570	6570	6570
KS25-1456	CORNEAL GRAFTING	30300	37890	45500
KS25-1457	CORNEAL PERFORATING INJURY	21210	26510	31810
KS25-1458	CYCLOCRYOPEXY/ARC	5470	6830	8190
KS25-1459	DACRYOCYSTORHINOSTOMY / CYSTECTOMY	18490	23120	27740
KS25-1460	DILATED FUNDUS	270	270	270
KS25-1461	DIPLOPIA CHARTING	1650	1650	1650
KS25-1462	DIURNAL VARIATION (5 TIMES TRENCHES) BOTH EYES	1870	1870	1870
KS25-1463	DIURNAL VARITATION (FOR GLAUCOMA)	930	930	930
KS25-1464	DRAINAGE OF LACRIMAL ABSCESS	3940	4940	5940
KS25-1465	DRAINAGE OF LID ABSCESS	3940	4940	5940
KS25-1466	ENTROPION	12530	15640	18770
KS25-1467	ENUCLEATION	14970	18710	22450
KS25-1468	EPICANTHUS (Eye)	14970	18710	22450
KS25-1469	EPILATION FOR TRICHIASIS	330	330	330
KS25-1470	EVISCERATION	12060	15080	18090
KS25-1471	EXENTERATION	35660	44570	53460
KS25-1472	EYE DRESSING	200	200	200
KS25-1473	EYE WASH	310	310	310
KS25-1474	FUNDUS WITH AOD	330	330	330
KS25-1475	GLAUCOMA WORK UP (GONIOSCOPY, VFA, COLOUR DIGITAL FUNDUS PHOTO, TN CHECK UP)	3660	3660	3660
KS25-1476	GONIOSCOPY	550	550	550
KS25-1477	HD OCT ANGIOGRAPHY	5740	5740	5740
KS25-1478	INCLUSION CYST REMOVAL UNDER LA	9240	11550	13860
KS25-1479	INDIRECT FUNDUS EXAMINATION	420	420	420
KS25-1480	INTRAOCULAR FOREIGN BODY REMOVAL	35660	44570	53460
KS25-1481	INTRAOCULAR SURGERY OF ANTERIOR SEGMENT (Glaucoma Needling) TRABECUDECTOMY	22450	28060	33680
KS25-1482	LENSECTOMY	35660	44570	53460

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1483	LID CYST/WART REMOVAL	4210	4960	5970
KS25-1484	LID TUMORS EXCISION & REPIAR	17470	21850	26210
KS25-1485	LID WOUND REPAIR	4210	4960	5970
KS25-1486	LOW VISUAL AIDS	520	520	520
KS25-1487	NCT/ ATN	130	130	130
KS25-1488	ND YAG CAPSULOTOMY MACHINE CHARGE	700	700	700
KS25-1489	ND YAG LASER (PI) MACHINE CHARGE	800	800	800
KS25-1490	NON PHACO CATARACT SURGERY/SICS (COST OF IOL EXTRA)	21230	26520	31840
KS25-1491	OCT - ANGIOGRAPHY	6050	6050	6050
KS25-1492	OCT - CCT	1650	1650	1650
KS25-1493	OCT - RNFL	4000	4000	4000
KS25-1494	OCT ANGLE ASSESSMENT	2200	2200	2200
KS25-1495	OCT MACULA	4000	4000	4000
KS25-1496	OCT-RNFL+CCT+ANGLE ASSESSMENT	6600	6600	6600
KS25-1497	OCT-RNFL+GCL	6050	6050	6050
KS25-1498	ORBITOTOMY	35660	44570	53460
KS25-1499	ORTHOPTIC EVALUATION	340	340	340
KS25-1500	ORTHOPTIC EXERCISE (ADDITIONAL CHARGE PER SITTING RS. 50/- AFTER 12 SITTINGS)	1680	1680	1680
KS25-1501	ORTHOPTIC EXERCISES (FOR 12 sittings) & (ADDITIONAL Rs. 50 per sitting)	1680	1680	1680
KS25-1502	PACHYMETRY/CCT	930	930	930
KS25-1503	PHACO MICS (COST OF IOL EXTRA)	24970	31200	37450
KS25-1504	PROBING SYRINGING - BILATERAL	9350	11700	14040
KS25-1505	PROBING SYRINGING - UNILATERAL	4370	5470	6540
KS25-1506	PTERYGIUM	16500	16500	16500
KS25-1507	PTERYGIUM EXCISION WITH CONJUNCTIVAL AUTOGRAFT WITH TISSEEL GLUE (COST OF GLUE EXTRA	16000	20000	24000
KS25-1508	PTOSIS (Eye)	19950	24950	29940
KS25-1509	REFRACTION CHARGE	330	330	330
KS25-1510	REFRACTION TEST	200	200	200
KS25-1511	REPAIR OF LID CANALICULI	15190	19010	22810
KS25-1512	REPAIR OF LID COLOBOMA	15190	19010	22810
KS25-1513	REPAIR OF LID INJURIES	14970	18710	22450
KS25-1514	RETINOCRYOPEXY	12060	15080	18090
KS25-1515	SCHIRMER'S TEST	230	230	230
KS25-1516	SECONDARY IOL IMPLANTATION (COST OF IOL EXTRA)	14060	17560	21050
KS25-1517	SHIRMER'S TEST	330	330	330
KS25-1518	SQUINT VERTICAL MUSCLE	19470	24300	29160
KS25-1519	SQUNIT HARIZONTAL MUSCLE	18490	23120	27740
KS25-1520	SUB TENOUS INJECTION	710	880	1060
KS25-1521	SUTURE REMOVAL	1370	1370	1370
KS25-1522	SYRINGING OF LACRIMAL SAC IN OPD	750	750	750
KS25-1523	T.T.T.	8690	8690	8690
KS25-1524	TARSORRHAPHY	9980	12470	14970
KS25-1525	ULTRASONIC PACHYMETERY (CCT)	930	1170	1410
KS25-1526	VISION THERAPY EVALUATION (FUSION, COVERGENCE, NPC, NPA, PRISM BAR TEST)	1250	1250	1250

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1527	VISUAL FIELD ANALYSIS (VFA) HUMPHREY	2990	2990	2990
KS25-1528	YAG CAPSULOTOMY(PER EYE)	3500	3500	3500
KS25-1529	YAG PI (PER EYE)	4550	4550	4550
RETINAL PROCEDURE				
KS25-1530	FFA (Both eye)	5190	6500	7800
KS25-1531	FUNDUS PHOTO	920	920	920
KS25-1532	INTRAVERTICAL INJECTION (Without Medicines)	9000	9000	9000
KS25-1533	INTRAVERTICAL INJECTION PAGENAX	49660	49660	49660
KS25-1534	INTRAVITREAL ACCENTRIX INJECTION (Including medicine)	38110	38110	38110
KS25-1535	INTRAVITREAL EYLEA (including medicine)	62700	62700	62700
KS25-1536	INTRAVITREAL OZURDEX INJECTION (Including medicine)	49660	49660	49660
KS25-1537	INTRAVITREAL RAZUMAB INJECTION (Including medicine)	24250	24250	24250
KS25-1538	INTRAVITREAL TRIAMCINOLONE INJECTION (IVTA)	11550	11550	11550
KS25-1539	INTRAVITREAL VABYSMO INJECTION	80000	80000	80000
KS25-1540	LASER PRP (Per sitting per Eye)	5190	5190	5190
KS25-1541	LASER PRP FOR 6 SITTING (Package)	25410	25410	25410
KS25-1542	LATTICE LASER / BARRAGE LASER (Single sitting each Eye)	5500	5500	5500
KS25-1543	OCT CHARGE (Per Eye)	3000	3000	3000
KS25-1544	OCT CHARGES (Both eye)	5190	5190	5190
KS25-1545	RETINAL LASER (MISC.)	5770	5770	5770
KS25-1546	ROP GREEN LASER (BOTH EYES)	75070	75070	75070
KS25-1547	ROP INTRAVITREAL INJECTION (ACCENTRIX)	51970	51970	51970
KS25-1548	ROP INTRAVITREAL INJECTION (RAZUMAB)	28870	28870	28870
KS25-1549	ROP SCREENING	2310	2310	2310

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
	ORTHOPAEDICS			
I. SPINAL SURGERY				
KS25-1550	ASPIRATION OF COLD ABSCESS IN SPINAL TUBERCULOSIS	2780	3490	4190
KS25-1551	CORE DECOMPRESSION	31760	39650	47610
KS25-1552	DRAINAGE OF PSOAS ABSCESS, PARAVERTEBRAL ABSCESS LUMBAR COLD ABSCESS & CERVICAL COLD ABSCESS	14070	17580	21100
KS25-1553	LAMINECTOMY, DISC EXCISION, ANTEROLATERAL DECOMPRESSION & SPINAL FUSION	33000	41280	49500
KS25-1554	LOCALIZED CAST FOR SCOLIOSIS	5960	7460	8950
KS25-1555	POP JACKET	5490	6870	8270
KS25-1556	SCOLIOSIS-CORRECTION & SPINAL FUSION OR HARRINGTON INSTRUMENTATION OR OTHER SPINAL INSTRUMENTATION OR SPINAL OSTEOTOMY, TUMOUR SURGERY & SPINAL FRACTURE FIXATION	51370	64210	77050
KS25-1557	SURGERY TWO LEVELS OR TWO APPROCHES OF SPINE	61010	76240	91510
II. HIP SURGERY				
KS25-1558	ACETABULUM AND PELVIC FRACTURE ORIF - DOUBLE COLUMN	60510	75640	90760
KS25-1559	ACETABULUM AND PELVIC FRACTURE ORIF - SINGLE COLUMN	45370	56700	68060
KS25-1560	ARTHROTOMY HIP-DHS/DCS & CONDYLAR BLADE PLATE FIX,UPPER FERMORAL OSTEOTOMY WITH BLADE-PLATE FIX,BIPOLAR HIP REPL.ARTHRODESIS HIP&KNEE/FEMORAL NECK NAILING WITH/WITHOUT PLATING,OPEN REDUCTION OF HIP DISLOCATION,PROSTHESIS,MOORES PINNING CANNULATED SCREWS	32650	40810	48970
KS25-1561	CEMENTED OR UNCEMENTED MODULAR BIPOLAR HIP REPLACEMENT	46340	57930	69530
KS25-1562	GIRDLE STONE ARTHRO/DEBRIDEMENT HIP/ARTHOTOMY/BIOPSY HIP	25150	32750	41910
KS25-1563	INTRA CAPSULAR AND EXTRA CAPSULAR HIP FRACTURE FIXATION OR REPLACEMENT	37090	46340	55550
KS25-1564	OPEN REDUCTION HIP DISLOCATION/PIPKINS FRACTURE	41910	52390	62860
KS25-1565	PARTIAL JOINT REVISION (HIP, KNEE)	46200	57790	69340
KS25-1566	PELVIC FRACTURE ORIF - TWO COLUMN	55310	69150	82990
KS25-1567	PELVIC OSTEOTOMY REMOVAL OF TOTAL HIP PROSTHESIS	29680	37120	44540
KS25-1568	REVISION TOTAL JOINT REPLACEMENT (HIP, KNEE, SHOULDER)	74330	92920	111480
KS25-1569	TOTAL HIP REPLACEMENT	50410	63020	75600
KS25-1570	TOTAL KNEE, ELBOW, ANKLE REPLACEMENT,SHOULDER REPLACEMENT	50410	63020	75600
III. FRACTURES - OPEN REDUCTION				
KS25-1571	ARTHROTOMY - ANKLE, WRIST	14150	18860	23570
KS25-1572	ARTHROTOMY - SHOULDER, ELBOW, KNEE	18070	24100	30120
KS25-1573	BONE GRAFT - LARGE	14300	17840	21430
KS25-1574	BONE GRAFT - SMALL	10440	13050	15650
KS25-1575	COMPLEX FRACTURE FIXATION WITH DOUBLE PLATING/DUAL FIXATION	52040	65040	78070
KS25-1576	CRUSH INJURY FINGER & TOES - Major Hand Injuries more than 3 Fingures	17590	21980	26370
KS25-1577	CRUSH INJURY FINGER & TOES - Repair & Reconstruction of Crush Injury Hand	20880	26060	31280
KS25-1578	CRUSH INJURY FINGER & TOES (Single) - With K Wire Fixation	8690	10830	13010
KS25-1579	CRUSH INJURY FINGER & TOES (Single) - With Skin Grafting	11040	13820	16580
KS25-1580	CRUSH INJURY FINGER & TOES (Single) - Without Fixatation	5510	6910	8280
KS25-1581	DEBRIDEMENT AND CLOSURE OF GUN SHOT WOUND WITH OR WITHOUT REMOVAL OF BULLET	19830	24780	29720
KS25-1582	DEBRIDEMENT AND CLOSURE PRIMARY - LARGE	21480	26840	32220
KS25-1583	DEBRIDEMENT AND CLOSURE PRIMARY - MEDIUM	15330	19180	23020
KS25-1584	DEBRIDEMENT AND CLOSURE PRIMARY - SMALL	7790	9700	11640
KS25-1585	DEBRIDEMENT WITH VAC THERAPY APPLICATION (LARGE)	26480	31760	38140
KS25-1586	DEBRIDEMENT WITH VAC THERAPY APPLICATION (MEDIUM)	15120	17800	21360
KS25-1587	DEBRIDEMENT WITH VAC THERAPY APPLICATION (SMALL)	11010	12940	15530

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1588	DRAINAGE ABSCESS - PYOGENIC LARGE	8020	9980	11990
KS25-1589	DRAINAGE ABSCESS - PYOGENIC SMALL	4830	6040	7230
KS25-1590	EXT. FIXATOR OF HAND & FEET BONES	6800	8480	10170
KS25-1591	EXT. FIXATOR OF HAND AND FEET BONES - TARSALS-MATATARSALS - PHALANGES - CARPALS META CARPALS	8760	10960	13140
KS25-1592	EXTERNAL FIXATOR APPLICATION - DEFORMITY CORRECTION LIMB LENGHTINING	37140	46430	55690
KS25-1593	EXTERNAL FIXATOR APPLICATION - LONG BONES (PELVIS,FEMUR, HUMERUS, FOREARM & TIBIA)	18310	22880	27460
KS25-1594	EXTERNAL FIXATOR APPLICATION - RING FIXATOR (ILLZAROV OR ONGNESYON) - FRACTURES	29160	36480	43760
KS25-1595	EXTERNAL FIXATOR APPLICATION - SMALL BONES SINGLE	11540	14410	17300
KS25-1596	HAND & FOOT FRACTURES - SINGLE BONE - PLATE FIXATION	16530	20690	24790
KS25-1597	HAND & FOOT FRACTURES - SINGLE BONE - SCREW FIXATION	11320	14120	16960
KS25-1598	HEMIEPIPHYSIODESIS GROWTH MODULATION- SINGLE BONE	22270	27850	33420
KS25-1599	INTERLOCKING NAILING - FEMUR, TIBIA, HUMERUS	33990	42470	50970
KS25-1600	MAJOR ORIF UNDER C-ARM, ORIF FRACTURE HUMERUS, B.B. FOREARM, FEMUS, TIBIA, BIMALLEOLAR &	31750	39650	47610
KS25-1601	MEDIAL CONDYLE OF HUMERUS, FRACTURE LATERAL CONDYLE OF HUMERUS, OLECRANON FRACTURE, HEAD RADIUS, LOWER END RADIUS, LAT. MALLEOLUS MEDIAL, PATELLA & SCAPHOID, SINGLE FOREARM BONE, FRACTURE CLAVICLE, SUPRA CONDYLAR HUMERUS ETC.	22270	27850	33420
KS25-1602	PER CUTANEOUS K. WIRE FIXATION UNDER C.ARM	14090	17600	21120
KS25-1603	PERCUTANEOUS FIXATION - SUPRACONDYLAR FRACTURE, SCREW FIXATION AC JOINT FIXATION	20290	25380	30450
KS25-1604	PERIARTICULAR LARGE JOINT FIXATION WITH DOUBLE OR MULTIPLE PLATES WITH HIP, KNEE, ANKLE, S	43560	54460	65350
KS25-1605	PERIARTICULAR/INTRA-ARTICULAR FRACTURE FIXATION WITH SPECIAL PLATE SMALL JOINTS (HAND &	22890	28610	34350
KS25-1606	RECON NAILING, DFN, PFN, PHN, ETC. COLLESES FRACTURE LOWER RADIUS (COMPLEX INTRA-ARTICULAR FRACTURE, NON-UNION MAJOR BONES, PILON AND OTHERS DIFFICULT COMMINUTED FRACTURES OF LONG BONES, CALCANEUM FRACTURES)LOCK PLATING	36320	45410	54490
KS25-1607	SEGMENTAL FRACTURE OF LONG BONES /MULTI LEVEL FRACTURE DIFFICULT INSTRUMENTATION FIXATION	39460	49300	59170
KS25-1608	TENS FIXATION OF FRACTURE LONG BONES UNDER C-ARM	28400	35530	42600
KS25-1609	TENSION BAND WIRING (TBW)	21220	26520	31820
IV. OPEN REDUCTION - DISLOCATIONS				
KS25-1610	ACROMIOCLAVICULAR & STERNO-CLAVICULAR JT./ ANKLE DISLOCATION, ELBOW DISLOCATION	16800	21020	25230
KS25-1611	MP, MTP & IP JOINTS	7610	9480	11370
KS25-1612	SHOULDER DISLOCATION, KNEE DISLOCATION	23070	28840	34630
KS25-1613	SURGERY FOR RECURRENT DISLOCATION SHOULDER, ELBOW, PATELLA ETC.	26620	37400	44880
KS25-1614	T.M. JOINT	25450	31800	38170
KS25-1615	WRIST DISLOCATION-INTER CARPAL & TARSAL JOINTS	11090	13880	16630
V. CLOSE REDUCTION				
KS25-1616	AE / AK ADULTS / SHOULDER HOOD/ SHOULDER SPICA	3390	4210	5050
KS25-1617	CAST BRACING	6260	7830	9400
KS25-1618	CLOSE REDUCTION OF DISLOCATION WITH CAST/TRACTION/STRAPPING - ANKLE, TARSAL JOINTS, WRIST, ACD, STERNO CLAVICULAR JOINT - UNDER GA	5260	6560	7850
KS25-1619	CLOSE REDUCTION OF DISLOCATION WITH CAST/TRACTION/STRAPPING - ANKLE, TARSAL JOINTS, WRIST, ACD, STERNO CLAVICULAR JOINT - UNDER SEDATION	4120	5140	6150
KS25-1620	CLOSE REDUCTION OF DISLOCATION WITH CAST/TRACTION/STRAPPING - HIP	6760	8450	10140
KS25-1621	CLOSE REDUCTION OF DISLOCATION WITH CAST/TRACTION/STRAPPING - SHOULDER,KNEE & ELBOW	5100	6380	7630
KS25-1622	CLOSE REDUCTION OF DISLOCATION WITH CAST/TRACTION/STRAPPING - SMALL JOINTS OF HANDS AND FEET, MANIPULATION OF PULLED ELBOW	1840	2290	2750
KS25-1623	HIPSPICA IN CHILDREN	3490	4370	5210
KS25-1624	POP CAST APPLICATION (not requiring redu.) - AE / AK (Children)	2680	3330	4000
KS25-1625	POP CAST APPLICATION (not requiring redu.) - BE / BK	2450	3080	3680

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1626	POP SLAB APPLICATION - AE / AK	2280	2830	3420
KS25-1627	POP SLAB APPLICATION - BE / BK	1860	2300	2770
KS25-1628	REDUCTION AND CAST APPLICATION UNDER GA AND C-Arm - AE/AK SYNTHETIC	8630	10800	12980
KS25-1629	REDUCTION AND CAST APPLICATION UNDER GA AND C-Arm - BE/BK SYNTHETIC	6260	7820	9390
KS25-1630	REDUCTION AND CAST APPLICATION UNDER GA AND C-Arm - POP BE/BK	5260	6560	7850
KS25-1631	REDUCTION AND CAST APPLICATION UNDER GA AND C-Arm - POP CAST AE/AK	8020	9980	11990
KS25-1632	REDUCTION AND CAST APPLICATION UNDER SEDATION - AE/AK SYNTHETIC	5420	6760	8080
KS25-1633	REDUCTION AND CAST APPLICATION UNDER SEDATION - BE/BK SYNTHETIC	4960	6190	7440
KS25-1634	REDUCTION AND CAST APPLICATION UNDER SEDATION - POP AE/AK	4860	6070	7290
KS25-1635	REDUCTION AND CAST APPLICATION UNDER SEDATION - POP BE/BK	3970	4990	5960
KS25-1636	REDUCTION AND HIP SPICA UNCLER GA	10900	13610	16330
KS25-1637	REDUCTION UNDER SEDATION (add)	1680	2120	2550
KS25-1638	STRAPPING FOR # CLAVICLE/NECK HUMERUS ACROMIO-CLAVICULAR/ R.J.BANDAGE DISLOCATION OR FRACTURE/ RIBS/KNEE/ANKLE/WRIST/SKIN TRACTION	1500	1870	2240
KS25-1639	SYNOVECTOMY/ SOFT TISSUE RELEASE MAJOR JOINTS SHOULDERS/ELBOW/ KNEE/HIP	24790	31000	37180
KS25-1640	SYNOVECTOMY/SOFT TISSUE RELEASE SMALL JOINTS	12620	15760	18930
KS25-1641	SYNTHETIC CAST APPLICATION - AE / AK	4060	5050	6080
KS25-1642	SYNTHETIC CAST APPLICATION - BE / BK	2940	3650	4390
VI. OTHER PROCEDURES				
KS25-1643	AMPUTATIONS - DIGITS	5790	7260	8720
KS25-1644	AMPUTATIONS - FOOT OR HAND	11370	14240	17100
KS25-1645	AMPUTATIONS - LEG OR FOREARM	16710	20890	25080
KS25-1646	AMPUTATIONS - THIGH OR ARM	16710	20890	25080
KS25-1647	ARTHRODESIS - SHOULDER, KNEE-ANKLE, TRIPLE, ELBOW, WRIST, SUBTALAR	20880	26060	31280
KS25-1648	ARTHRODESIS MP & IP JOINTS	6910	8630	10360
KS25-1649	ARTHROSCOPIC SURGERY - LIGAMENT RECONSTRUCTIONS, SYNOVECTOMY ARTHROSCOPY ASSISTED FIXATION,BANKART REPAIR	37210	46530	55820
KS25-1650	ARTHROSCOPIC SURGERY - MENISCECTOMY LOOSE BODY, FOREIGN BODY REMOVAL AND CARPAL TUNNEL RELEASE ETC.	25880	32340	38830
KS25-1651	ARTHROSCOPIC SYNOVECTOMY (SUBTOTAL) LARGE JOINTS - KNEE, HIP, SHOULDER, ELBOW	37480	46850	56230
KS25-1652	ARTHROSCOPY DIAGNOSTIC	20430	25520	30620
KS25-1653	ARTHROSCOPY OF KNEE	20430	25520	30620
KS25-1654	ARTHROSCOPY SURGERY ANKLE / WRIST	19470	24310	29170
KS25-1655	ARTHROSCOPY SURGERY SHOULDER / AC JOINT HIP	39350	49190	59050
KS25-1656	ASPIRATION OF JOINTS	2820	3380	4060
KS25-1657	BONE BIOPSY - NEEDLE	6270	7850	9420
KS25-1658	BONE BIOPSY - OPEN ILLUM & LONG BONES	14680	18350	22020
KS25-1659	BONE BIOPSY - SHORT BONES	8450	10550	12670
KS25-1660	BONE BIOPSY - SPINE (OPEN)	18180	22730	27270
KS25-1661	BONE TUMORS: CURRETAGE, BONE GRAFTING OF BONE TUMOR OF FEMUR, TIBIA, HUMERUS, FOREAM	20880	26060	31280
KS25-1662	BONE TUMORS: EXCISION EXOSTOSIS OF LONG BONES (SUPERFICIAL)	11760	14660	17610
KS25-1663	BONE TUMORS: EXCISION EXOSTOSIS OF LONG BONES (DEEP)	14270	17820	21410
KS25-1664	BONE TUMORS: EXCISION TUMOR LONG BONES AXIAL SKETETON WITH OR WITOUT BONE GRAFTING	20150	25220	30270
KS25-1665	BONE TUMORS: RECONSTRUCTION SURGERY IN BONE TUMORS	30570	38210	45850
KS25-1666	BONE TUMORS: SURGERY, TUMORS OF SMALL BONES OF HAND & FEET	9250	11560	13900
KS25-1667	CORRECTIVE OSTEOTOMY AND RING FIXATION APPLICATION	42930	53670	64400

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1668	CORRECTIVE OSTEOTOMY LUNG BONES AND FIXATION WITH SPECIAL TO DURING PLATES	42930	53670	64400
KS25-1669	CORRECTIVE OSTEOTOMY OF LONG BONES, DUPUYTRENS CONTRACTURE	18860	23560	28260
KS25-1670	CRAMMER WIRE SPLINT (AE/AK)	820	820	820
KS25-1671	CRAMMER WIRE SPLINT (BE/BK)	420	420	420
KS25-1672	DIFFICULT IMPLANT BROKEN SCREW/ NAILS/INCARCERATED IMPLANTS	16760	20950	25150
KS25-1673	EXCISION ARTHROPLASTY OF ELBOW & KNEE/ WRIST	18490	23120	27740
KS25-1674	EXCISION ARTHROPLASTY OF SMALL JOINTS	9250	11560	13900
KS25-1675	FASCIOTOMY, LEG, FIREARM ETC.	13070	16330	19590
KS25-1676	HEMI EPIPHYSIODEDIS (STAPLING) Cost of Stapler Extra	20330	25410	30490
KS25-1677	HIGH TIBIALOSTEOTOMY CONVENTIONAL PLATE FIXATION	20880	26060	31280
KS25-1678	KNEE SYNOVECTOMY MENISCECTOMY	18860	23560	28260
KS25-1679	K-WIRE REMOVAL (OPD) <2	1500	1500	1500
KS25-1680	K-WIRE REMOVAL (OPD) >2	2500	2500	2500
KS25-1681	LATARJET PROCEDURE	37210	46530	55820
KS25-1682	MANIPULATION OF CLUB FOOT & CONG. DISLOCATION OF	2770	3450	4120
KS25-1683	MANISCAL REPAIR	34450	43100	51690
KS25-1684	MINI OPEN ROTATOR CUFF REPAIR OF SHOULDER	37480	46850	56230
KS25-1685	NAIL DYNAMIZITION	6010	7500	9010
KS25-1686	NERVE SURGERY : BRACHIAL PLEXUS SURGERY	43530	54430	65300
KS25-1687	NERVE SURGERY : MICROSCOPIC REPAIR OF NERVE	33440	41780	50100
KS25-1688	NERVE SURGERY : REPAIR / TRANSPOSITION	9550	11970	14340
KS25-1689	OPEN EC LIGAMENT RECANTS OF SHOULDER	35430	44320	53160
KS25-1690	OPEN MCL/LCL KNEE LIGAMENT RECONSTRUCTION	35430	44320	53160
KS25-1691	OPERATIONS OF HALLUS VAGUS & VARUS	14680	18350	22020
KS25-1692	POLIO SURGERY - BACHELORS/ GRICE GREEN ARTHRODESIS CALCANEAL OSTEOTOMY	18490	23120	27740
KS25-1693	POLIO SURGERY - EPIPHYSEAL STIMULATION EPIPHYSEODESIS	11370	14240	17100
KS25-1694	POLIO SURGERY - LEG LENGTHING / SHORTENING	31280	39090	46930
KS25-1695	POLIO SURGERY - SOUTERS, YOUNT RELEASE & CONTRACTURE RELEASE	17590	21980	26370
KS25-1696	QUADRICEPS PLASTY/PATELLA TENDON OR TENDO ACHILIS REPAIR OR RECONSTRUCTION	17960	22400	26910
KS25-1697	REMOVAL OF EXTERNAL FIXATOR WITHOUT ANAESTHESIA	3550	6390	7670
KS25-1698	REMOVAL OF IMPLANTS - R/O FOREARM NAIL, K-NAIL, A.O. OR RING FIXATOR & SCREWS UNDER GA or RA OR UNDER LA IN CARM, WIRES UNDER GA,EXTERNAL FIXATOR GA	11760	14660	17610
KS25-1699	REMOVAL OF IMPLANTS - R/O LARGE IMPLANTS (LIKE A.O. PLATE, DHS, PROSTHESIS), INTERLOKED N	14300	17840	21430
KS25-1700	REMOVAL OF IMPLANTS - REMOVAL OF K. WIRES, SCREWS UNDER LA	3300	4090	4890
KS25-1701	REMOVAL OF IMPLANTS - REMOVAL OF POSTERIOR SPINAL INTRUMENTATION	30700	38330	46010
KS25-1702	REMOVAL OF K-WIRE WITHOUT ANAESTHESIA	1550	2770	3310
KS25-1703	REMPLISSAGE	37210	46530	55820
KS25-1704	SKELETAL TRACTION OF FEMUR, TIBIA, CALCANEUM, OLECRANON	4830	6040	7230
KS25-1705	SKIN TRACTION, PELVIS, TRACTION, HALTER TRACTION	7360	9210	11040
KS25-1706	SKULL TRACTION	6830	8510	10230
KS25-1707	SOFT TISSUE TUMOR/ SWELLING BIOPSY - DEEP	17470	21930	26310
KS25-1708	SOFT TISSUE TUMOR/ SWELLING BIOPSY - SUPERFICIAL	10040	12060	14490
KS25-1709	SOFT TISSUE TUMOR/ SWELLING EXCISION	24020	28810	34570
KS25-1710	SURGERY FOR CHRONIC OSTEOMYELITIS, SAUCERIZATION, SEQUESTRECTOMY - ANKLE, HAND, FOOT	10860	13570	16270

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1711	SURGERY FOR CHRONIC OSTEOMYELITIS, SAUCERIZATION, SEQUESTRECTOMY - DRAINAGE IN ACUTE OSTEMYELITIS WITH OR WITHOUT BONE DRILLING	12560	15700	18820
KS25-1712	SURGERY FOR CHRONIC OSTEOMYELITIS, SAUCERIZATION, SEQUESTRECTOMY - FEMUR & HUMERUS	17580	21970	26360
KS25-1713	SURGERY FOR CHRONIC OSTEOMYELITIS, SAUCERIZATION, SEQUESTRECTOMY - FIBULA RADIUS UINA CLAVICLE	13860	17340	20790
KS25-1714	SURGERY FOR CHRONIC OSTEOMYELITIS, SAUCERIZATION, SEQUESTRECTOMY - SKIN GRAFTING - LARGE	19230	24030	28840
KS25-1715	SURGERY FOR CHRONIC OSTEOMYELITIS, SAUCERIZATION, SEQUESTRECTOMY - SKIN GRAFTING - MEDIUM	10570	13200	15870
KS25-1716	SURGERY FOR CHRONIC OSTEOMYELITIS, SAUCERIZATION, SEQUESTRECTOMY - SKIN GRAFTING - SMALL	7620	9500	11380
KS25-1717	SURGERY FOR DE-QUEVAINSS DISEASE TRIGGER FINGER ETC.	8450	10550	12670
KS25-1718	SURGERY FOR HAGLUND'S DEFORMITY	27500	34370	41250
KS25-1719	SURGERY FOR TENNIS, ELBOW, GOLFERS ELBOW, PLANTERS FASCITIS, CARPEL TUNNEL RELEASE	13320	16680	20000
KS25-1720	TENDON SURGERY - LENGHTHENING (per tendon) (ADD 50% FOR EACH ADDITIONAL TENDON)	7440	9270	11160
KS25-1721	TENDON SURGERY - MULTIPLE TENDON REPAIR (FOR ONE ADDITIONAL TENDON) (ADD 50% TO SINGLE TENDON REPAIR) FOR EACH ADDITION	9250	11560	13900
KS25-1722	TENDON SURGERY - PERCUTAMOUS TENOTOMY	6300	7900	9470
KS25-1723	TENDON SURGERY - REPAIR/RECONSTRUCTION OF TENDON OR LIGMAMENTS OF LARGE PARTS BIOPSY TA REPAIR	16530	20690	24790
KS25-1724	TENDON SURGERY - SINGLE TENDON REPAIR	6180	7700	9260
KS25-1725	TENDON SURGERY - TENDON TRANSFERS	15920	19910	23880
KS25-1726	TIGHTROPE FIXATION OF LIGAMENT / TENDON/ DISLOCATIONS JOINTS OPEN	20120	25150	30170
KS25-1727	VASCULAR REPAIR	28030	35050	42040

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
VII. PAEDIATRIC ORTHO PROCEDURES				
KS25-1728	AMC - CORRECTIVE OSTEOTOMY	20390	25480	30580
KS25-1729	AMC - SOFT TISSUE RELEASE	18380	22960	27540
KS25-1730	AMC - TALECTOMY	as per actuals		
KS25-1731	C.D.H. - CLOSED REDUCTION - SPICA	8700	10890	13050
KS25-1732	C.D.H. - CONGENITAL CONSTRUCTION BAND Z PLASTY, MULTIPLE OR SINGLE FOR RELEASE - LARGE	16810	21030	25240
KS25-1733	C.D.H. - CONGENITAL CONSTRUCTION BAND Z PLASTY, MULTIPLE OR SINGLE FOR RELEASE - MEDIUM	10570	13200	15870
KS25-1734	C.D.H. - CONGENITAL CONSTRUCTION BAND Z PLASTY, MULTIPLE OR SINGLE FOR RELEASE - SMALL	7620	9500	11380
KS25-1735	C.D.H. - OPEN REDUCTION - SPICA	11200	13970	16790
KS25-1736	C.D.H. - RECONSTRUCTIVE PROCEDURE (Various Derotation Osteotomy, Acctavuloplasty etc)	21050	26310	31590
KS25-1737	CEREBRAL PALSY - CORRECTIVE OSTEOTOMY	20390	25480	30580
KS25-1738	CEREBRAL PALSY - EGGERS PROCEDURE OR OTHER TENDON TRANSFER	9550	11970	14340
KS25-1739	CEREBRAL PALSY - NEURECTOMY SOFT TISSUE RELEASE	18380	22960	27540
KS25-1740	HEMIMELIA - CLOSED REDUCTION	8700	10890	13050
KS25-1741	HEMIMELIA - RECONSTRUCTIVE PROCEDURE	21050	26310	31590
KS25-1742	HEMIMELIA - SOFT TISSUE RELEASE	11200	13970	16790
KS25-1743	RELEASE OF STERNOMASTOID TUMOR & TENOTOMY (TORTICOLLIS)	16080	20120	24160
KS25-1744	SOFT TISSUE RELEASE IN CLUB FOOT	18380	22960	27540
KS25-1745	UMEX OR JEES FIXATURE FOR C TEVI - 1 to 5 YEAR	29160	36480	43760
KS25-1746	UMEX OR JEES FIXATURE FOR C TEVI - 5 to 11 YEAR	31000	38730	46470
VIII. VERTEBRAL DECOMPRESSION				
KS25-1747	NON SURGICAL TREATMENT FOR BACK PAIN (OPD BASIS)	68760		
KS25-1748	NON SURGICAL TREATMENT FOR BACK PAIN (PACKAGE) (IPD BASIS)	87130	108900	130690

NOTE : VERTEBRAL DECOMPRESSION PACKAGE INCLUDE (1 MRI SCAN + 3 DAYS ROOM CHARGES)

IX. MISCELLANEOUS				
KS25-1749	DISARTICULATION - FORE-QUARTER OR HIND QUARTER	33650	42060	50430
KS25-1750	DISARTICULATION - HIP OR SHOULDER	20880	26060	31280
KS25-1751	DISARTICULATION - OF KNEE/ ELBOW/ WRIST/ ANKLE	13380	16710	20070
KS25-1752	DRESSING - LARGE (MISC.) (Ortho.Sur.)	2490		
KS25-1753	DRESSING - MEDIUM (MISC.) (Ortho.Sur.)	1260		
KS25-1754	DRESSING - SMALL (MISC.) (Ortho.Sur.)	490		
KS25-1755	MISCELLANEOUS - EPIDURAL INJECTION	6300	7900	9470
KS25-1756	MISCELLANEOUS - FOREIGN BODY REMOVAL - G.A.	14520	18130	21780
KS25-1757	MISCELLANEOUS - FOREIGN BODY REMOVAL - L.A..	5960	7460	8950
KS25-1758	MISCELLANEOUS - GANGLION EXCISION, CAPSULOTOMY FINGER JOINTS, DRAINAGE OF PALMER ABSCESS	5960	7460	8950
KS25-1759	MISCELLANEOUS - INTRA ARTICULAR INJECTION - LARGE JOINTS	2300	2860	3460
KS25-1760	MISCELLANEOUS - INTRA ARTICULAR INJECTION - SMALL JOINTS	1550	1910	2300
KS25-1761	MISCELLANEOUS - INTRA-ARTICULAR, ASPIRATION / INJECTION	2910	3630	4360
KS25-1762	MISCELLANEOUS - JOINT ASPIRATION, HAEMOTOMA OR COLD ABSCESS / ASPIRATION	4080	5130	6140
KS25-1763	MISCELLANEOUS - JOINT MANIPULATION / GA	4200	5270	6300
KS25-1764	MISCELLANEOUS - LOCAL ST/OTHER INJECTION - TENNIS ELBOW, TENDINITIS OR FIBROSITIS	1360	1690	2030

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
NEURO SURGERY				
KS25-1765	AAD FIXATION (POSTERIOR)	49020	61270	73520
KS25-1766	AAD SURGERY TRANSORAL	50850	63570	76270
KS25-1767	ABDOMINAL WALL BONE FLAP INSERTION	5520	6900	8280
KS25-1768	ANEURYSM CRANIAL	102630	128290	153940
KS25-1769	ANT. CERVICAL DECOMPRESSION & STABILIZATION	46020	57530	69040
KS25-1770	ANTERIOR CERVICAL DISSECTOMY	42840	53560	64260
KS25-1771	ANTERIOR THARACIC AND LUMBER SURGERY	60510	75640	90770
KS25-1772	BACLOFEN PUMP INSERTION	52800	66000	79190
KS25-1773	BALLOON OCCLUSION TEST	33010	41270	49510
KS25-1774	BIOFEED BACK	3000	3750	4520
KS25-1775	BONE FLAP REMOVAL	36380	45470	54570
KS25-1776	BOTOX INJECTION FOR MIGRAINE	4560	5700	6840
KS25-1777	BOTOX INJECTIONS - BLEPHAROSPASM	4800	5990	7180
KS25-1778	BOTOX INJECTIONS - HEMIFACIAL SPASM	4800	5990	7180
KS25-1779	BOTOX INJECTIONS -DYSTAXIA	6710	8380	10060
KS25-1780	BOTOX INJECTIONS -SPASTICITY	6710	8380	10060
KS25-1781	BOTOX INJECTIONS -WRITERS CRAMP	6710	8380	10060
KS25-1782	BRACHIAL PLEXUS EXPLORATION & MICRO SUTURING	66700	83380	100040
KS25-1783	BRAIN ABSCESS DRAINAGE	55890	69870	83840
KS25-1784	BRAIN ABSCESS TAPPING	23570	29470	35360
KS25-1785	BRAIN STEM SURGERY	66430	83030	99630
KS25-1786	BURR HOLE	27180	33980	40770
KS25-1787	BURR HOLE DIAGNOSTIC	28790	35980	43160
KS25-1788	C.S.F. RHINORHOEA (SURGERY)	45520	56890	68280
KS25-1789	CALORIC TESTING	3000	3750	4520
KS25-1790	CARPAL TUNNEL DECOMPRESSION	39250	49050	58870
KS25-1791	CERVICAL ARTIFICIAL DISC REPLACEMENT	49680	62090	74510
KS25-1792	CERVICAL POSTERIOR FIXATION	51610	64510	77420
KS25-1793	CERVICAL SYRINX SURGERY	48920	61150	73370
KS25-1794	CHEMOTHERAPEUTIC WAFERS INSERTION FOR MALIGNANT TUMOR	52930	66160	79410
KS25-1795	CHRONIC SUBDURAL HEMATOMA	42040	52570	63060
KS25-1796	COGNITIVE THERAPY	3000	3750	4520
KS25-1797	COMBINED ANTERIOR AND POSTERIOR PROCEDURE FOR SPIN	119840	149800	179760
KS25-1798	CP ANGLE SURGERY	65650	82060	98460
KS25-1799	CRANIECTOMY	46710	58390	70050
KS25-1800	CRANIOPLASTY	42320	52910	63490
KS25-1801	CRANIOSYNOSTOSIS SURGERY - MAJOR	48000	60000	72000
KS25-1802	CRANIOSYNOSTOSIS SURGERY - MINOR	32000	40000	48000
KS25-1803	CRANIOTOMY	58180	72720	87260
KS25-1804	CRANIOTOMY - HAEMATOMA	58180	72720	87260
KS25-1805	CRANIOTOMY - TUMORS	70320	87910	105490
KS25-1806	CRANIOTOMY - TUMORS (COMPLEX)	82460	103070	123670
KS25-1807	CRANIOTOMY - VASCULAR MALFORMATION	70320	87910	105490

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1808	CRANIOTOMY WITH LABECTOMY	60510	75640	90770
KS25-1809	DBS BATTERY CHANGE	20000	25000	30000
KS25-1810	DEBRIDEMENT SCALP WOUND - LARGE	12120	15160	18190
KS25-1811	DEBRIDEMENT SCALP WOUND - SMALL	6300	7880	9460
KS25-1812	DECOMPRESSIVE CRANIOTOMY INFARCTION	44970	56210	67450
KS25-1813	DEEP BRAIN STIMULATION (STERIOTACTIC)	75140	93930	112720
KS25-1814	DEPRESS FRACTURE SURGERY	44180	55230	66270
KS25-1815	DURAL SINUS THROMBOLYSIS (PKG-3 DAYS) excluding Medicine & Cons.	143120	178890	214680
KS25-1816	ENCEPHALOCELE	44020	55020	66030
KS25-1817	ENDOSCOPIC DISCECTOMY	75640	94540	113450
KS25-1818	ENDOSCOPIC EVACUATION OF HEMATOMA	45750	57190	68620
KS25-1819	ENDOSCOPIC THIRD VENTRICULOSTOMY	41720	52150	62580
KS25-1820	ENDOSCOPIC TUMOUR	43120	53890	64670
KS25-1821	EPIDURAL INJECTION BACKACHE	8940	11180	13410
KS25-1822	EPILEPSY SURGERY	55230	69040	82850
KS25-1823	EPLEY'S THERAPY	3000	3750	4520
KS25-1824	FACIAL BONE AND SKULL BONE PLATING	14660	18340	22010
KS25-1825	FORAMEN MAGNUM DECOMPRESSION	38320	47890	57490
KS25-1826	ICP MONITORING	6020	7520	9020
KS25-1827	INTRA OPERATIVE NEUROMUSCULAR MONITORING	29200	36520	43820
KS25-1828	INTRADURAL CATHETER INSERTION	6420	8040	9650
KS25-1829	INTRAVENOUS THROMBOLYSIS - Neurologist	19870	24830	29800
KS25-1830	LAMINECTOMY	52800	66000	79190
KS25-1831	LAMINECTOMY - DISC.	52800	66000	79190
KS25-1832	LAMINECTOMY - TUMOR	52800	66000	79190
KS25-1833	LAMINECTOMY WITH POSTERIOR FIXATION	52800	66000	79190
KS25-1834	LAMINOPLASTY	52800	66000	79190
KS25-1835	MEDIAN NERVE DECOMPRESSION	22970	28710	34450
KS25-1836	MENINGIOMA SURGERY	71550	89440	107330
KS25-1837	MENINGO ENCEPHALOCELE	59330	74160	88990
KS25-1838	MENINGO MYELOCELE	54830	68550	82260
KS25-1839	MICRODISECTOMY	50600	63250	75900
KS25-1840	MICROVASCULAR DECOMPRESSION (TRIGEMINAL NERVE / FACIAL NERVE)	56000	70000	84000
KS25-1841	MINI CRANIOTOMY	34760	43460	52150
KS25-1842	MINIMALLY IN VASIVE SPINAL SURGERY	52930	66160	79410
KS25-1843	MINIMALLY INVASIVE SPINAL FUSION	60510	75640	90770
KS25-1844	MYELOGRAM	8230	10270	12330
KS25-1845	NEURONAVIGATION	71550	89440	107330
KS25-1846	OMAYA RESERVOIR	12870	16090	19300
KS25-1847	OPTIC NERVE SHEATH FENESTRATION	40000	50000	60000
KS25-1848	OPTIC NERVE TUMOUR	53670	67090	80520
KS25-1849	ORBIT REPAIR	17890	22360	26830
KS25-1850	ORBIT TUMOR	53670	67090	80520
KS25-1851	OSTEOMYELITIS DEBRIDEMENT	33130	41410	49700

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1852	PERIPHERAL NERVE SURGERY (MICROSCOPIC REPAIR OF NERVE)	36900	46130	55360
KS25-1853	PERIPHERAL NERVE TUMOUR	43470	54350	65210
KS25-1854	PERIPHERAL NEURECTOMY (TRIGEMINAL)	18770	23470	28160
KS25-1855	POST DECOMPRESSION & STABILIZATION	67630	84520	101430
KS25-1856	POSTERIOR FOSSA CRANIOTOMY	71170	88970	106770
KS25-1857	PROGRAMMABLE SHUNT	30130	37670	45210
KS25-1858	REINSERTION OF BONE FLAP	20710	25890	31060
KS25-1859	REPAIR OF FACIAL WOUNDS SMALL	6200	7750	9290
KS25-1860	REPAIR OF LARGE FACIAL WOUNDS	10350	12940	15510
KS25-1861	SACRAL NERVE STIMULATION	20000	25000	30000
KS25-1862	SCALP MASS EXCISION LARGE	33130	41410	49700
KS25-1863	SCALP MASS EXCISION SMALL	10350	12940	15510
KS25-1864	SCALP ROTATIONAL FLAP	33130	41410	49700
KS25-1865	SHUNT REVISION	34760	43460	52150
KS25-1866	SKULL BASE TUMOUR EXCISION	58440	73050	87660
KS25-1867	SKULL TRACTION APPLICATION	8220	10260	12310
KS25-1868	SPINA BIFIDA SURGERY	48210	60260	72310
KS25-1869	SPINAL CORD BIOPSY	52170	65210	78260
KS25-1870	SPINAL MANIPULATIVE THERAPY	3000	3750	4520
KS25-1871	STERIOTACTIC BIOPSY BRAIN	75140	93930	112720
KS25-1872	STERIOTACTIC HAEMATOMA REMOVAL	75140	93930	112720
KS25-1873	STEROID INJECTION FOR CARPAL TUNNEL SYNDROME	4620	5770	6930
KS25-1874	SYRINGO SUBARACHNOID SHUNT	38840	48550	58270
KS25-1875	TETHERED CORD RELEASE	32000	40000	48000
KS25-1876	THECO PERITONEAL SHUNT	40410	50510	60610
KS25-1877	TRANS SPHENOIDAL SURGERY	78130	97680	117200
KS25-1878	TWIST DRILL CRANIOTOMY	10260	12850	15410
KS25-1879	UPDRS RATING	3570	4470	5370
KS25-1880	V. ARTERIAL SHUNT	44490	55630	66750
KS25-1881	V. PERITONEAL SHUNT	42450	53060	63670
KS25-1882	VAGAL NERVE STMULATION	33630	42020	50420
KS25-1883	VENTRICULAR DRAIN INSERTION	26840	33550	40250
KS25-1884	VENTRICULAR PUNCTURE - 1ST	6560	8190	9840
KS25-1885	VENTRICULAR PUNCTURE - SUBSEQUENT	4520	5630	6760
KS25-1886	VERTEBROPLASTY & KYPHOPLASTY	52800	65990	79190
KS25-1887	VP SHUNT REMOVAL	16810	21010	25210
NEURO INTERVENTIONAL PROCEDURES				
KS25-1888	CAROTID ARTERY STENTING	67780	84740	101680
KS25-1889	CERBRAL AVM	72760	90960	109140
KS25-1890	CHECK ANGIOGRAM	8490	10610	12730
KS25-1891	CHEMOEMBOLIZATION OF MALIGNANT BRAIN TUMOUR	87320	109140	130980
KS25-1892	COILING OF CCF	109140	136430	163720
KS25-1893	COMPLEX ANEURYSM	90960	113700	136430
KS25-1894	COMPLEX AVM EMBOLIZATION	90960	113700	136430

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1895	DSA CEREBRAL - FOUR VESSELS ANGIOGRAPHY (Including Cath Lab Charges)	30320	37890	45470
KS25-1896	DSA CEREBRAL - SIX VESSELS ANGIOGRAPHY (Including Cath Lab Charges)	36380	45470	54570
KS25-1897	EMBOLIZATION FOR BLEEDING	66700	83380	100040
KS25-1898	EMBOLIZATION OF DURAL AVF	84890	106110	127340
KS25-1899	EMBOLIZATION OF ECA TUMOR	72760	90960	109140
KS25-1900	EMBOLIZATION OF SPINAL TUMOR	84890	106110	127340
KS25-1901	INTRA ARTERIAL CHEMOTHERAPY OF BRAIN STEM GLIOMAS	90960	113700	136430
KS25-1902	INTRAARTERIAL THROMBOLYSIS	48510	60630	72760
KS25-1903	INTRAARTERIAL VASODILATATION	22590	28240	33890
KS25-1904	INTRACRANIAL ANEURSYM-SINGLE	72760	90960	109140
KS25-1905	INTRACRANIAL ANGIOPLASTY	66700	83380	100040
KS25-1906	INTRACRANIAL FLOW DIVERTER PLACEMENT	118840	148550	178280
KS25-1907	INTRACRANIAL MECHANICAL THROMBECTOMY	66700	83380	100040
KS25-1908	INTRACRANIAL STENTING	72760	90960	109140
KS25-1909	INTRACRANIAL VENOUS THROMBOLYSIS (CATHETER DIRECTED)	46080	57600	69120
KS25-1910	KYPHOPLASTY	61560	76940	92340
KS25-1911	MUSCLE BIOPSY	11000	12940	15530
KS25-1912	RADIOFREQUENCY ABLATION TRIGEMINAL NERVE	38500	45300	54350
KS25-1913	SPINAL ANGIOGRAPHY	18190	22740	27280
KS25-1914	SPINAL AVM	72760	90960	109140
KS25-1915	SURAL NERVE BIOPSY	16500	19410	23300
KS25-1916	TUMOR EMBOLISATION COMPLEX	60630	75790	90960
KS25-1917	TUMOR EMBOLISATION SIMPLE	36380	45470	54570

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
GYNAECOLOGY & OBSTETRICS				
KS25-1918	ABDOMINAL CERVICOPEXY FOR UV PROLAPSE (BURCHES COLPOSUSPENSION)	16650	20830	24990
KS25-1919	ABDOMINAL STERLIZATION	6180	7730	9260
KS25-1920	AMNIOCENTASIS - SINGLE PREGNANCY	5970	7460	8940
KS25-1921	AMNIOCENTASIS -TWIN PREGNANCY, THARAPEUTIC	7950	9920	11920
KS25-1922	ANT. COLPORRHAPHY REPAIR OF CYSTOCELE WITH OR WITHOUT REPAIR OF URETROCELE	12780	15980	19160
KS25-1923	ANTERIOR & POSTERIOR VAGINAL WALL REPAIR	18480	24680	29620
KS25-1924	ASPIRATION OF OVARIAN CYST ULTRASOUND GUIDED	3570	4480	5380
KS25-1925	BARTHOLIN ABSCESS (I & D AND MARSUPALISATION)	6070	7460	8940
KS25-1926	BARTHOLIN CYST EXCISION - BILATERAL	7950	9940	11930
KS25-1927	BARTHOLIN CYST EXCISION - UNILATERAL	5170	6490	7790
KS25-1928	CAESAREAN - PRIMARY	23600	29500	35400
KS25-1929	CAESAREAN (2nd LSCS)	24960	31200	37440
KS25-1930	CAESAREAN (3rd LSCS)	25340	31690	38040
KS25-1931	CAESAREAN 2nd WITH TUBECTOMY	26030	32530	39030
KS25-1932	CAESAREAN 3rd WITH TUBECTOMY	28430	35550	42660
KS25-1933	CAESAREAN HYSTERECTOMY	30070	37600	45110
KS25-1934	CAESAREAN WITH TUBECTOMY	24930	31150	37380
KS25-1935	CAUTERY CERVIX / CRYOTHERAPY	4720	5910	7080
KS25-1936	CERVICAL BIOPSY/ ENDOMETRIAL BIOPSY	4530	5630	6780
KS25-1937	CERVICAL CERCLAGE (LAPAROSCOPIC)	24000	30000	36000
KS25-1938	CERVICAL CERCLAGE (OPEN)	16000	20000	24000
KS25-1939	CERVICAL TEAR	10700	13360	16040
KS25-1940	COLPORRHAPHY OR FOTHERGILL	16130	20160	24220
KS25-1941	CYSTOCELE AND RECTOCELE REPAIR (PERINEORRAPHY)	12280	15320	18410
KS25-1942	D & C OR MTP OR POLYPECTOMY	5830	7270	8730
KS25-1943	D & C OR MTP WITH PREVIOUS ONE LSCS	6950	8680	10430
KS25-1944	D&C / MTP (0-8 WEEKS)	5820	7270	8730
KS25-1945	D&C / MTP (10-12 WEEKS)	8020	10010	12030
KS25-1946	D&C / MTP (8-10 WEEKS)	6940	8680	10420
KS25-1947	D&C / MTP AND STERLIZATION (OPEN)	10230	12780	15320
KS25-1948	D&E VESICULAR MOLE	9070	11350	13640
KS25-1949	DEBULKING -CYTOREDUCTIVE SURGERY FOR OVARIAN CANCER	31510	39400	47310
KS25-1950	DIVISION OF ADHESION OR FIMBRO PLASTY	27800	34740	41730
KS25-1951	DRAINAGE OF ABDOMINAL WALL HEMATOMA	15700	19590	23510
KS25-1952	DRAINAGE OF VULVAL HEMATOMA FOLLOWING DELIVERY	8620	10770	12920
KS25-1953	ECTOPIC LAPAROTOMY (OPEN)	17700	22150	26580
KS25-1954	ECTOPIC LAPAROTOMY WITH TUBECTOMY	19850	24820	29800
KS25-1955	ECTOPIC PREGNANCY / TUBAL SURGERY	21200	26510	31810
KS25-1956	END TO END ANASTOMOSIS BILATERAL (TUBAL RECANALIZATION)	21350	26660	32020
KS25-1957	ENDOMETRIAL ABLATION / THERMAL ABLATION	36670	45840	55010
KS25-1958	EPIDURAL ANALGESIA (FOR PAINLESS LABOR)	9720	11680	14000
KS25-1959	EPISIOTOMY REPAIR IN OT-PRIMARY	4650	5840	7000
KS25-1960	EPISIOTOMY REPAIR IN OT-SECONDARY SUTURING	4650	5840	7000

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-1961	EUA (WITH OR WITHOUT NEEDLING)	4030	5040	6040
KS25-1962	EXCISION OF CERVICAL STUMP	15630	19570	23480
KS25-1963	EXCISION OF SCAR ENDOMETRIOSIS	23480	29330	35180
KS25-1964	EXCISION OF VAGINAL SEPTUM	6510	8140	9770
KS25-1965	EXCISSION OF LABIAL CYST	7000	9330	11190
KS25-1966	EXCISSION OF URETHRAL CARUNCLE	6050	8350	10030
KS25-1967	FOTHERGILL/ MANCHESTER REPAIR WITH TUBAL LIGATION	21660	27060	32490
KS25-1968	FRACTIONAL CURETTAGE	6320	7920	9470
KS25-1969	HAEMOTOCOLPOS - EXCISION SEPTUM	4590	5730	6870
KS25-1970	HYMENOPLASTY	26800	33510	40200
KS25-1971	HYSTERECTOMY ABDOMINAL	24960	31200	37440
KS25-1972	HYSTERECTOMY ABDOMINAL WITH BSO	28000	35000	42000
KS25-1973	HYSTEROPLASTY-REPAIR OF UTERINE ANOMALY	26520	33160	39800
KS25-1974	HYSTERORRHAPHY OF RUPTURED UTERUS	29850	37360	44820
KS25-1975	HYSTEROSCOPIC D&C / RPOC	13600	17000	20400
KS25-1976	HYSTEROSCOPIC DISSECTION OF UTERINE MYOMA	30730	41220	49460
KS25-1977	HYSTEROSCOPIC DISSECTION OF UTERINE POLYP	11490	15370	18460
KS25-1978	HYSTEROSCOPIC DISSECTION OF UTERINE SYNECHAE	25870	34610	41520
KS25-1979	HYSTEROSCOPIC METROPLASTY	17600	22000	26400
KS25-1980	HYSTEROSCOPIC REMOVAL OF IUCD	13600	17000	20400
KS25-1981	HYSTEROSCOPIC SEPTAL RESECTION	28000	35000	42000
KS25-1982	HYSTEROSCOPIC TREATMENT OF ECTOPIC PREGNANCY, CERVICAL EVACUATION	20000	25000	30000
KS25-1983	HYSTEROSCOPY DIAGNOSTIC & D/C ONLY	12800	16000	19200
KS25-1984	HYSTEROTOMY	17090	21390	25680
KS25-1985	HYSTEROTOMY WITH TUBECTOMY	19380	24230	29080
KS25-1986	I& D OF VAGINAL / VULVAL HEMATOMA-NON OBSTERTRICAL	13010	16270	19500
KS25-1987	I&D OF VULVAL OR PERINEAL ABSCESS	4000	5000	6000
KS25-1988	INTRA UTERINE CONTRACEPTIVE DEVICE (IUCD) REMOVAL	1600	2000	2400
KS25-1989	INTRA-UTERINE FETAL REDUCTION	14000	18000	21600
KS25-1990	INTRODUCTION OF HEMOSTATIC AGENT / PACK FOR NON-OBST VAGINAL HEMORRHAGE	1600	2000	2400
KS25-1991	IUI UNDER SEDATION	4800	6000	7200
KS25-1992	KELLYS SUTURE	9600	12000	14400
KS25-1993	LAPAROSCOPIC HIGH UTEROSACRAL SUSPENSION	27200	34000	40800
KS25-1994	LEEP (LOOP ELECTROSURGICAL EXCISION PROCEDURE)	5600	7000	8400
KS25-1995	LE-FORDS OPERATION/ COLPOCLEISIS	14850	18550	22260
KS25-1996	LSCS FOR PLACENTA ACRETA	24000	30000	36000
KS25-1997	LSCS FOR PLACETA PERCRETA	38400	48000	57600
KS25-1998	LSCS FOR PREVIOUS CLASSICAL LSCS / HYSTROTOMY	24000	30000	36000
KS25-1999	LSCS TO PLACENTA INCRETA	24000	30000	36000
KS25-2000	LYSIS OF LABIAL ADHESIONS	5020	6270	7500
KS25-2001	MANUAL REMOVAL OF PLACENTA (M.R.P.)	5600	7000	8400
KS25-2002	MC DONALD SUTURE REMOVAL	1770	2210	2640
KS25-2003	MCDONALD STITCHING	4000	5000	6000
KS25-2004	MENCHESTER REPAIR	21060	26300	31590

Code	Description	IPD Charges		
		Economy	Semi Pvt	Pvt
KS25-2005	MID TRIMESTER ABORTION	10400	13000	15600
KS25-2006	MID TRIMESTER MTP (20 - 24 wks.)	20000	25000	30000
KS25-2007	MID TRIMESTER MTP WITH PREVIOUS SCAR (Upto 20 wks.)	17600	22000	26400
KS25-2008	MTP HIGH RISK (NULLI RAPOUS, POST-2 C-SECTION OR MYOMACTOMY WITHIN 6 MONTHS OF LSCS	13600	17000	20400
KS25-2009	MYOMECTOMY-SINGLE MYOMA (OPEN)	20420	25520	30600
KS25-2010	NORMAL DELIVERY	23600	29500	35400
KS25-2011	OPEN RESECTION OF PARA-OVARIAN CYST	17040	21300	25550
KS25-2012	OPERATIVE HYSTERCOSCOPY - SEPTUM	29860	37370	44840
KS25-2013	OVARIAN OPERATIVE PROCEDURE (OTHERS)	23970	29990	35950
KS25-2014	PARA URETHERAL TEAR	5140	6960	8350
KS25-2015	PARTIAL HYMENECTOMY OR REVISION OF HYMEN RING	4700	5870	7040
KS25-2016	PLASTIC REPAIR OF INTROITUS	8000	10000	12000
KS25-2017	POLYPECTOMY (Gynae)	10870	13580	16300
KS25-2018	POST COLPORRHAPHY REPAIR OF RECTOCELE WITH OR WITHOUT PERINEORRHAPHY	9950	12460	14960
KS25-2019	PPH MEDICAL MANAGEMENT	7200	9000	10800
KS25-2020	PPH SURGICAL MANAGEMENT - B-LYNCH SUTURE	8000	10000	12000
KS25-2021	PPH SURGICAL MANAGEMENT - INTERAL ILIAC LIGATION	9600	12000	14400
KS25-2022	PPH SURGICAL MANAGEMENT - UTERINE ARTERY LIGATION	8000	10000	12000
KS25-2023	PRE-TERM VIGINAL DELIVERY	21820	27280	32750
KS25-2024	RADICAL HYSTERECTOMY FOR MALIGNANCY (ABDOMINAL)	43190	54000	64790
KS25-2025	RECTOCELE REPAIR	8000	10000	12000
KS25-2026	RECTOVAGINAL FISTULAS REPAIR (IIIrd DEGREE)	17600	22000	26400
KS25-2027	REMOVAL OF CIRCLAGE SUTURE IN OPD	1060	1320	1590
KS25-2028	REMOVAL OF IMPACTED VAGINAL FOREIGN BOBY	6650	8300	9980
KS25-2029	REPAIR OF ENTEROCELE ABDOMINAL APPROACH	13270	16600	19900
KS25-2030	REPAIR OF ENTEROCELE VAGINAL APPROACH	11200	14000	16800
KS25-2031	REPAIR OF RECURRENT RVF ABDOMINAL APPROACH	21050	26290	31570
KS25-2032	REPAIR OF RECURRENT RVF VAGINAL APPROACH	23640	29550	35450
KS25-2033	REPAIR OF RECURRENT VVF ABDOMINAL APPROACH	29750	37200	44650
KS25-2034	REPAIR OF RECURRENT VVF VAGINAL APPROACH	28000	35000	42000
KS25-2035	REPAIR OF RECURRENT VVF WITH FLAP COVER	38860	42950	46630
KS25-2036	REPOSITION OF INVERSION UTERUS	8000	10000	12000
KS25-2037	RESUSPENSION OF POST HYSTRECTOMY VAULT PROLAPSE	35290	44100	52910
KS25-2038	RESUTURING OF ABDOMINAL WOUND - DEEP	6510	8140	9770
KS25-2039	RH NEGATIVE-FETAL INTRA- UTERINE TRANSFUSION	21100	26390	31650
KS25-2040	RICHARDSON SLING OPERATION	16650	20830	24990
KS25-2041	SALPHINGECTOMY-OPEN (UNILATERAL)	18230	22790	27330
KS25-2042	SALPINGO-OPHRECTOMY - BILATERAL (OPEN)	14980	18700	22450
KS25-2043	SALPINGO-OPHRECTOMY - UNILATERAL (OPEN)	12890	16080	19320
KS25-2044	SHRIODKAR'S STITCHING	3770	4720	5630
KS25-2045	SIMPLE OVARIAN CYSTECTOMY - BILATERAL (OPEN)	14980	18700	22450
KS25-2046	SIMPLE OVARIAN CYSTECTOMY - UNILATERAL (OPEN)	12890	16080	19320
KS25-2047	STAGING OF LAPAROTOMY	45010	56260	67510
KS25-2048	SUPERFICIAL RESUTURING OF ABDOMINAL WOUND	7380	9220	11030

Code	Description	IPD Charges Economy	Semi Pvt	Pvt
KS25-2049	SUPRACERVICAL ABDOMINAL HYSTERECTOMY (SUB TOTAL)	29550	36920	44300
KS25-2050	SUTURE OF VULVAL / PERINEAL TEAR -NON OBSTETRIC	4390	5480	6580
KS25-2051	SUTURING PERINEAL TEARS - COMPLETE (IIIRD DEGREE)	12800	16000	19200
KS25-2052	SUTURING PERINEAL TEARS - DEEP (IIND DEGREE/PERINEAL HAEMOTOMA)	11200	14000	16800
KS25-2053	SUTURING PERINEAL TEARS - SUP. (IST DEGREE)	5380	6720	8070
KS25-2054	TAH IN PATIENT WITH PREVIOUS PELVIC SURGERY EXCLUDING TUBAL LIGATION	34620	43280	51940
KS25-2055	TAH WITH PELVIC FLOOR REPAIR	34400	43000	51600
KS25-2056	TOTAL VULVECTOMY WITH DISECTION OF NODES	24000	30000	36000
KS25-2057	TRACHELORRHAPHY,PLASTIC REPAIR OF UTERINE EX-VAGINAL APPROACH	14710	18380	22020
KS25-2058	TRANS CERVICAL RESECION OF ENDOMETRIUM (TCRE)	38500	51500	61830
KS25-2059	TRIPLET CAESAREAN	22460	28060	33670
KS25-2060	TRIPLET DELIVERY	18480	22160	26590
KS25-2061	TUBO OVARIAN MASS EXCISION	22400	28000	33600
KS25-2062	TUBOPLASTY (BY OPERATING MICROSCOPE)	32000	40000	48000
KS25-2063	TVTO (TRANS VAGINAL TAPE) (CONSUMABLES EXTRA) (TAPE)	22400	28000	33600
KS25-2064	TWIN / BREECH DELIVERY	24780	30980	37170
KS25-2065	TWIN CAESAREAN	24010	30020	36010
KS25-2066	UTERINE INVERSION CORRECTION	24000	30000	36000
KS25-2067	VACUUM/FORCEPS DELIVERY	24780	30980	37170
KS25-2068	VAG. VAULT PROLAPSED REPAIR -VAULT SUSP. ABD.APPROACH	28000	35000	42000
KS25-2069	VAG. VAULT PROLAPSED REPAIR -VAULT SUSP. VAG..APPROACH	28000	35000	42000
KS25-2070	VAGINAL CYSTECTOMY/ TUMOR	12720	15880	19100
KS25-2071	VAGINAL EXPLORATION/ EXTENDED VAGINAL TEAR	6320	7920	9470
KS25-2072	VAGINAL HYSTERECTOMY - (NDVH- NON DESCENT VAGINAL HYSTERECTOMY)	40000	50000	60000
KS25-2073	VAGINAL HYSTERECTOMY AND REPAIR	24000	30000	36000
KS25-2074	VAGINAL TEAR	13350	16680	20050
KS25-2075	VAGINOPLASTY	38920	48670	58390
KS25-2076	VBAC (VAGINAL BIRTH AFTER CAESEREAN)	20000	25000	30000
KS25-2077	VENTRISUSPENSION OF THE UTERUS ALONE	13650	17060	20470
KS25-2078	VESICOVAGINAL FISTULA (VVF)	29330	36660	43980
KS25-2079	VESICULAR MOLE SUCTION	12450	16730	20060
KS25-2080	VIRKUD SLING (LAPROSCOPIC)	24000	30000	36000
KS25-2081	VIRKUD SLING (OPEN)	20000	25000	30000
KS25-2082	VULVAL BIOPSY	4400	5500	6600
KS25-2083	WERTHEIM'S HYSTERECTOMY	47620	59540	71460
KS25-2084	WERTHEIM'S HYSTERECTOMY AND CYTOREDUCTIVE SURGERY FOR OVARIAN CANCER	49510	61890	74260

SURGICAL PROCEDURES

Code	Description	Charges
OPD PROCEDURE GYNAE		
KS25-2085	ANTENATAL CLASSES (PER SESSION)	1460
KS25-2086	ANTENATAL EXERCISE (PER SESSION)	990
KS25-2087	ANTENATAL WORKSHOP	2360
KS25-2088	ANTINATAL CARD - (General Reg. Fee - all visits payable)	200
KS25-2089	ANTINATAL CARD - 1ST TRIMESTER (7 weeks - 14 weeks)	8960
KS25-2090	ANTINATAL CARD - 2ND TRIMESTER (14 weeks - 26 weeks)	7490
KS25-2091	ANTINATAL CARD - 3RD TRIMESTER (26 weeks - 40 weeks)	5510
KS25-2092	COLPOSCOPY WITH BIOPSY	8800
KS25-2093	CRYOTHERAPY	4660
KS25-2094	CTG/NST - 1ST VISIT	1300
KS25-2095	CTG/NST - 2ND VISIT	740
KS25-2096	CTG/NST 24 Hr. MONITORING	4990
KS25-2097	CTG/NST SUBSEQUENT - BI WEEKLY	920
KS25-2098	CU.T. / IUCD REMOVAL (OPD)	740
KS25-2099	D & C UNDER SEDATION	8550
KS25-2100	DIAGNOSTIC COLPOSCOPY	4430
KS25-2101	DIETICIAN AND ANTINATAL CONSULTATION	880
KS25-2102	ENDOMETRIAL ASPIRATION/BIOPSY	3000
KS25-2103	ENDOMETRIAL BIOPSY/VULVUL BIOSPY WITH SHORT ADMISSION CHARGE	4170
KS25-2104	HSG PROCEDURE CHARGES DOCTORS FEE	1230
KS25-2105	HYDROTUBATION	5460
KS25-2106	IUCD INSERTION (Cu. T. / Multiload)	1300
KS25-2107	MERINA INSERTION	3500
KS25-2108	MTP PACKAGE (MEDICAL) 2-3 MEDICINES, 2-3 CONSULTATIONS AND USG ON DAY-14 (Non Redundable)	6000

SURGICAL PROCEDURES

Code	Description	Charges
	IN VITRO FERTILIZATION (IVF)	
KS25-2109	BLATOCYST CULTURE	15000
KS25-2110	CONSULTATION CHARGE (IVF)	1200
KS25-2111	CYST ASPIRATION	12000
KS25-2112	DFI (DNA FRAGMENTATION INDEX)	3000
KS25-2113	DONAR SEMEN	20000
KS25-2114	DONOR EGG CHARGES	50000
KS25-2115	EMBRYO FREEZING (1 Year / Embryo)	7500
KS25-2116	EMBRYO FREEZING (6 Months / Embryo)	5000
KS25-2117	EMBRYO GLUE	5000
KS25-2118	ERA (Endometrial Receptivity Analysis)	40000
KS25-2119	FROZEN EMBRYO TRANSFER (FET)	50000
KS25-2120	IUI (Procedure Charges/USG/ Consultation)	10000
KS25-2121	IUI -D	35000
KS25-2122	IUI WITH DONOR SEMEN	35000
KS25-2123	IVF -Self (2) + Donor Cycle (1)	300000
KS25-2124	IVF SELF 2 CYCLE (AMH >1.5)	230000
KS25-2125	IVF SELF 3 CYCLE (AMH >1.5)	280000
KS25-2126	IVF SELF PROCEDURE-WITH ICSI (AMH >1.5)	140000
KS25-2127	IVF WITH DONOR TWO CYCLE COMPLETE PACKAGE	280000
KS25-2128	IVF WITH DONOR OOCYTE PROCEDURE COMPLETE PACKAGE	200000
KS25-2129	LASER HATCHING SERVICE (LAH)	15000
KS25-2130	LOCAL ANAESTHESIA CHARGES	8000
KS25-2131	LOW AMH IVF ONE CYCLE AMH < 1.5	160000
KS25-2132	LOW AMH IVF SECOND CYCLE	190000
KS25-2133	LOW AMH IVF THIRD CYCLE	210000
KS25-2134	M-TESA	80000
KS25-2135	PESA/TESA	20000
KS25-2136	PICSI (Physiological Intracytoplasmic Sperm Injection)	10000
KS25-2137	PREMIUM DONOR SEMEN	25000
KS25-2138	PRP (Platelet-Rich Plasma)	5000
KS25-2139	REGISTRATION CHARGE (IVF)	1200
KS25-2140	REPEAT CYCLES -1	100000
KS25-2141	REPEAT CYCLES -2	150000
KS25-2142	REPEAT CYCLES -3	200000
KS25-2143	SPERM FREEZING (2 weeks)	3000
KS25-2144	SPERM FREEZING(Six Month)	10000
KS25-2145	SPERM FREEZING(One Year)	20000
KS25-2146	UNLIMITED EMBRYO FREEZING (upto 15 embryo)	50000
KS25-2147	VITALITY TEST	5000

INFERTILITY PACKAGE

★ *INFERTILITY PACKAGE ROUTINE (FEMALE)* **(Rs.9,750/-)**

- Complete Blood Count (C.B.C.)
- Blood Sugar (Random)
- Serum TSH
- Serum Prolactin
- Rubella Virus (IgG/IgM)
- Anti Mullarian Harmone (AMH)
- HOMA-IR ; Insulin Resistance Index
- Electrophoresis, HB / HPLC
- HBsAg (Hepatitis B Surface Antigen)
- HIV (AIDS) Antibody I & II (HIV)
- V.D.R.L.
- Urine Routine & Microscopic
- Semen Analysis (Husband)
- Baseline Ultrasonography (D2-D4)

★ *ADVANCED PACKAGE - I (HORMONE PROFILE) (FEMALE)* **(Rs. 8,480/-)**

- Serum FSH
- Serum LH — Day 2-3-4
- Anti Mullarian Harmone (AMH)
- Progestrone Level (Progestrone) - Day 21
- Serum Estradiol level (E2)
- Insuling (Fasting)

★ *ADVANCED PACKAGE - II (FEMALE)* **(Rs. 10,000/-)**

- Follicular Monitoring
- Semen Wash (Husband)
- IUI

★ *INFERTILITY PACKAGE - III (MALE)* **(Rs. 10,460/-)**

- Complete Blood Count (C.B.C.)
- Serum FSH
- Serum LH
- Serum Prolactin
- Serum TSH
- Hepatitis B Surface Antigen (HBsAg)
- HIV (AIDS) Antibody I & II (HIV)
- VDRL
- Culture, Semen (Pyogenic)
- Ultrasonography - Optional
- Consultation with Andrologist & Urologist - Optional

★ *(ADDITIONAL INVESTIGATIONS)*

- Endometrial Biopsy (Aspiration) Histopathological Examination
- TB-PCR
- AFB Staining (Z-N Staining)
- HSG/SSG
- Serum 17-OH Progesterone (17-OHP)
- Color Doppler

Note: The packages are already discounted. Hence no further discount is applicable.
In case any additional investigation is required alongwith any of the Infertility Packages the same will be done at 20% discount.

Code	Description	Charges
	ENT PROCEDURES	
A. OPD PROCEDURE		
KS25-2148	ANTRAL WASH OUTS - BILATERAL	6080
KS25-2149	ANTRAL WASH OUTS - UNILATERAL	3650
KS25-2150	ASPIRATION OF ABSCESS IN NECK REGION	2430
KS25-2151	AURAL BIOPSY	3650
KS25-2152	CALORIC TESTS	1990
KS25-2153	CAUTERIZATION BLEEDING POINT NOSE - CAUTERY ELECTRIC	3370
KS25-2154	CAUTERIZATION BLEEDING POINT NOSE - RADIO FREQUENCY	4810
KS25-2155	CAUTERIZATION BLEEDING POINT NOSE - SILVER NITRATE	1400
KS25-2156	CAUTERIZATION GRANULATIONS EAR/MT PERFORATION MARGINS - SILVER NITRATE / TCA, ORAL ULCER	1430
KS25-2157	CRM (Canalolith Repositioning Maneuver)	1500
KS25-2158	DIRECT LARYNGOSCOPY (OPD)	4180
KS25-2159	EAR PACKING & DRESSING - BILATERAL	1140
KS25-2160	EAR PACKING & DRESSING - UNILATERAL	700
KS25-2161	EUM SUCTION- BILATERAL	1910
KS25-2162	EUM SUCTION- UNILATERAL	1270
KS25-2163	EUSTACHIAN TUBOPLASTY	11550
KS25-2164	FB - NOSE / ORAL CAVITY - REMOVAL	1500
KS25-2165	FIBEROPTIC LARYNGOSCOPY	3850
KS25-2166	FIBREOPTIC NASAL ENDOSCOPY	3850
KS25-2167	FUNCTIONAL ENDOSCOPIC EVALUATION OF SWALLOWING	6000
KS25-2168	INJECTION NASAL TURBINATES / SUB MUCOSAL FIBROSIS	580
KS25-2169	INTRALESIONAL STEROID INJECTION FOR KELOID	520
KS25-2170	MYRINGOTOMY SUCTION-BILATERAL	3180
KS25-2171	MYRINGOTOMY SUCTION-UNILATERAL	1910
KS25-2172	NASAL ENDOSCOPY	4720
KS25-2173	NASOPHARYNGOSCOPY	3670
KS25-2174	OTO ENDOSCOPY	2620
KS25-2175	PIERCING PINNA - BILATERAL	2000
KS25-2176	PIERCING PINNA - UNILATERAL	1500
KS25-2177	REDUCTION OF LOCKJAW	700
KS25-2178	REMOVAL OF NASAL PACKING - BILATERAL	1140
KS25-2179	REMOVAL OF NASAL PACKING - UNILATERAL	730
KS25-2180	RIGID 70 DEGREE LARYNGOSCOPE	2000
KS25-2181	SUCTION CLEARANCE EARS / NOSE - BILATERAL	750
KS25-2182	SUCTION CLEARANCE EARS / NOSE - UNILATERAL	550
KS25-2183	SYRINGING EARS FB	1120
KS25-2184	SYRINGING EARS WAX - BILATERAL	750
KS25-2185	SYRINGING EARS WAX - UNILATERAL	550
KS25-2186	THROAT ENDOSCOPY	4720
KS25-2187	VESTIBULAR EVALUATION	3000
KS25-2188	VESTIBULAR REHABILITATION EXERCISE	510
B. WARD PROCEDURE		
KS25-2189	CAUTRY PATCHING EAR	3650
KS25-2190	CAVTERISATION OF NASAL VALUES BY RADIO FREQUENCY	4950
KS25-2191	CHANGE OF TRACHEOSTOMY TUBE	2250
KS25-2192	DECANNULATION OF TRACHEOSTOMY	1120
KS25-2193	DRESSING OF ENT REGION	550
KS25-2194	EXCISION OF BLEEDING NASAL POLYP BENIGN LESION ORAL CAVITY/ NASAL CAVITY BY RADIO FREQUENCY	4950
KS25-2195	FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING	7500

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi-Pvt	Pvt.
C. MINOR SURGICAL PROCEDURE				
KS25-2196	ANT NASAL PACKING - BILATERAL	4240	5320	6360
KS25-2197	ANT NASAL PACKING - UNILATERAL	2700	3370	4030
KS25-2198	ASPIRATION / DRAINAGE WITH PRESSURE BANDAGE - HAEMATOMA PINNA	2930	3670	4390
KS25-2199	BIOPSY FROM ORAL MUCOSA	2930	3670	4390
KS25-2200	CLOSURE OF TRACHEOSTOMYSTOMA	5620	7030	8430
KS25-2201	EXCISION SEBACEOUS CYST. AURICLE NECK / LYMPH NODE BIOPSY NECK, RETENTION CYST	3550	4430	5320
KS25-2202	I & D HAEMATOMA PINNA WITH SURGICAL PRESSURE BANDAGE	4370	5440	6530
KS25-2203	INTRA ORAL REMOVAL OF CALCULUS SUBMANDIBULAR DUCT	7060	8800	10560
KS25-2204	INTRA ORAL STEROID INJECTION	2200	3090	3850
KS25-2205	INTRATYMPANIC INJECTION	4960	7160	8820
KS25-2206	NASAL PACKING WITH CATHETER BALOONS - BILATERAL	3600	4450	5340
KS25-2207	NASAL PACKING WITH CATHETER BALOONS - UNILATERAL	2780	3480	4170
KS25-2208	PERITONSILLAR ABSCESS I & D / SEPTAL ABSCESS	5740	7160	8610
KS25-2209	REMOVAL OF FB NOSE / EARS /OROPHARYNX UNDER LA/GA	3370	4190	5050
KS25-2210	REMOVAL OF RHINOLITH	3670	4600	5520
KS25-2211	REMOVAL OF WAX EARS - BILATERAL UNDER GA	2290	2890	3480
KS25-2212	REMOVAL OF WAX EARS - UNILATERAL UNDER GA	1560	1960	2370
KS25-2213	REPAIR OF SPLIT LOBULES - BILATERAL	3810	4770	5720
KS25-2214	REPAIR OF SPLIT LOBULES - UNILATERAL	2570	3210	3840
KS25-2215	SINUS TRACT EXCISION	7980	9970	11980
KS25-2216	SUBMUCOSAL DIATHERMY / CAUTERIZATION TURBINATES	2990	3740	4470
KS25-2217	SUTURING OF SMALL WOUNDS NECK / NOSE/ EAR	3400	4230	5080
KS25-2218	TONGUE TIE RELEASE & SUTURING/ REPAIR OF CLW TONGUE / PALATE	3850	4830	5800
KS25-2219	VIDEO LARYNGOSCOPY	6200	6200	6200
D. MAJOR SURGICAL PROCEDURES				
CATEGORY - I (A)				
KS25-2220	ADENOIDECTOMY	7810	9730	11690
KS25-2221	ANT & POST NASAL PACKING	7810	9730	11690
KS25-2222	BIOPSY TONGUE	7810	9730	11690
KS25-2223	DIRECT LARYNGOSCOPY	7810	9730	11690
KS25-2224	EUM (Examination under Microscope)	7410	9260	11110
KS25-2225	EXCISION GROWTH - AURICLE	7810	9730	11690
KS25-2226	EXCISION OF NASAL SYNAECHAE (ADHESIONS) - UNILATERAL	7810	9730	11690
KS25-2227	INJECTION LARYNGOPLASTY	7440	7440	7440
KS25-2228	INTRANASAL ANTROSTOMY - UNILATERAL	7810	9730	11690
KS25-2229	MYRINGOTOMY - UNILATERAL	7810	9730	11690
KS25-2230	PARTIAL TURBENECTOMY	7810	9730	11690
KS25-2231	SINUS ENDOSCOPY	7810	9730	11690
CATEGORY - I (B)				
KS25-2232	AURAL POLYPECTOMY	11500	14340	17210
KS25-2233	BRONCHOSCOPY / OESOPHAGOSCOPY / RIGID	11500	14340	17210
KS25-2234	CANALOPLASTY	12040	15050	18060
KS25-2235	COBLATION ASSISTED TURBINOPLASTY	11470	14330	17200
KS25-2236	ENDOSCOPIC ADENOIDECTOMY	12040	15050	18060
KS25-2237	EXCISION OF NASAL SYNAECHAE (ADHESIONS) - BILATERAL	11500	14340	17210
KS25-2238	FB LARYNX / HYPOPHARYNX	11500	14340	17210
KS25-2239	MEATOPLASTY (ENT)	11490	14350	17220
KS25-2240	MYRINGOTOMIES - BILATERAL	11500	14340	17210
KS25-2241	NASAL POLYPECTOMY - UNILATERAL	11500	14340	17210
KS25-2242	REDUCTION MANIPULATION OF NASAL BONES	11180	13930	16740
KS25-2243	REMOVAL OF CYST/BENGIN TUMOUR PALATE/ ORAL CAVITY	11500	14340	17210

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi-Pvt	Pvt.
KS25-2244	RETROPHARYNGEAL ABSCESS I & D	11500	14340	17210
KS25-2245	SUBLABIAL ANTROSTOMY	11500	14340	17210
KS25-2246	UNILATERAL MYRINGOTOMY WITH GROMMET INSERTION	11500	14340	17210
CATEGORY - II				
KS25-2247	BILATERAL MYRINGOTOMIES WITH GROMETS	14400	17990	21590
KS25-2248	CALDWELL LUCS OPERATION	14400	17990	21590
KS25-2249	EXCISION GROWTH EXT. AUDITORY CANAL/ NASAL CAVITY	14400	17990	21590
KS25-2250	EXCISION SUBMANDIBULAR GLAND	14400	17990	21590
KS25-2251	EXCISION THYROGLOSSAL CYST. OR SINUS	14400	17990	21590
KS25-2252	FB BRONCHUS / OESOPHAGUS	14400	17990	21590
KS25-2253	INTRANASAL ETHEMOIDECTOMY	14400	17990	21590
KS25-2254	NASAL POLYPECTOMY BILATERAL	14400	17990	21590
KS25-2255	PARAPHARYNGEAL ABSCESS I & D	14400	17990	21590
KS25-2256	PRE-AURICULAR SINUS EXCISION	14400	17990	21590
KS25-2257	REPAIR PALATAL FISTULA	14400	17990	21590
KS25-2258	SEPTOPLASTY	14400	17990	21590
KS25-2259	TONSILLECTOMY	14400	17990	21590
KS25-2260	TRACHEOSTOMY	14000	17460	20980
KS25-2261	YOUNGS MODIFIED OPERATION	14400	17990	21590
CATEGORY - III				
KS25-2262	ADENOTONSILLECTOMY	16540	20670	24800
KS25-2263	CLOSURE OF ORO ANTRAL FISTULA	16540	20670	24800
KS25-2264	COBLATION ASSISTED ADENOIDECTOMY	15880	19840	23810
KS25-2265	DILATATION OESOPHAGEAL STRICTURES	16540	20670	24800
KS25-2266	ENDOSCOPIC SEPTOPLASTY	16060	17850	20530
KS25-2267	EXCISION BRANCHIAL CYST. / FISTULA	16540	20670	24800
KS25-2268	INTRA NASAL ETHEMOIDECTOMY - BILATERAL	16540	20670	24800
KS25-2269	LARYNGEAL WEB EXCISION	16540	20670	24800
KS25-2270	LIGATION EXT. CAROTID ARTERY / ANTERIOR ETHEMOIDAL ARTERY	16540	20670	24800
KS25-2271	PERCUTANEOUS TRACHEOSTOMY	15040	18790	22540
CATEGORY - IV				
KS25-2272	CHOANAL ATRESIA	20240	25300	30390
KS25-2273	COBLATION ASSISTED TONSILLIECTOMY	17640	22050	26460
KS25-2274	CORTICAL MASTOIDECTOMY	19690	24610	29560
KS25-2275	DIRECT LARYNGOSCOPY & BIOPSY	20240	25300	30390
KS25-2276	ENDOSCOPIC CAUTERIZATION OF BLEEDING VESSELS OF NOSE	20240	25300	30390
KS25-2277	EXCISION PHARYNGEAL POUCH / DIVERTICULUM	20240	25300	30390
KS25-2278	EXT ETHMOIDECTOMY	20240	25300	30390
KS25-2279	FRACTURE NASO ETHMOIDAL COMPLEX	20240	25300	30390
KS25-2280	LARYNGO FISSURE / LAT. PHARYNGOTOMY	20240	25300	30390
KS25-2281	LATERAL RHINOTOMY	20240	25300	30390
KS25-2282	MICROLARYNGEAL SURGERY	20240	25300	30390
KS25-2283	MYRINGOPLASTY / EXPLORATERY TYMPANOTOMY	20240	25300	30390
KS25-2284	OSSICULOPLASTY	19690	24610	29560
KS25-2285	PAN ENDOSCOPY & BIOPSY	20240	25300	30390
KS25-2286	STYLOIDECTOMY	20240	25300	30390
KS25-2287	THYROIDECTOMY PARTIAL	24070	30090	36100
CATEGORY - V				
KS25-2288	EXCISION CUM REPAIR LARYNGEAL / TRACHEAL STENOSIS	24070	30090	36100
KS25-2289	EXCISION NASOPHARYNGEAL ANGIOFIBROMA	24070	30090	36100
KS25-2290	FUNCTIONAL ENDOSCOPIC SINUS SURGERY (INCLUDING POSTOPT ENDOSCOPICS) - UNILATERAL	24070	30090	36100
KS25-2291	MASTOIDECTOMY - MODIFIED	23410	29250	35110

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi-Pvt	Pvt.
KS25-2292	MASTOIDECTOMY - RADICAL	24070	30090	36100
KS25-2293	MODIFIED BONDY'S OPERATION	39990	49990	59980
KS25-2294	RHINOPLASTY CORRECTIVE / AUGMENTED	24070	30090	36100
KS25-2295	STAPEDECTOMY	24070	30090	36100
KS25-2296	THYROIDECTOMY TOTAL	24070	30090	36100
KS25-2297	THYROPLASTY	24070	30090	36100
KS25-2298	TRANSANTRAL ETHYMOIDECTOMY (HORGANS)	24070	30090	36100
KS25-2299	TYMPANO PLASTY / MASTIOD CAVITY OBLITERATION	23410	29250	35110
KS25-2300	UVULO PALATO PHARYNGOPLASTY	24070	30090	36100
KS25-2301	VIDIAN NEURECTOMY	24070	30090	36100
CATEGORY - VI				
KS25-2302	COCHLEAR IMPLANTATION	52090	65110	78130
KS25-2303	ENDO LYMPHATIC SAC DECOMPRESSION	32150	40150	48190
KS25-2304	ENDOSCOPIC DCR	32150	40150	48190
KS25-2305	FACIAL NERVE DECOMPRESSION	32150	40150	48190
KS25-2306	FUNCTIONAL ENDOSCOPIC SINUS SURGERY (INCLUDING POSTOP ENDOSCOPICS) BILATERAL	32150	40150	48190
KS25-2307	MASTOIDECTOMY WITH TYMPANOPLASTY	36000	45000	54000
KS25-2308	MAXILLECTOMY	32150	40150	48190
KS25-2309	MODIFIED UVULO PALATO PHARYNGOPLASTY	36000	45000	54000
KS25-2310	OTOPLASTY	29210	36520	43820
KS25-2311	RADICAL ETHEMOIDAL / FRONTAL / SPHENOID SURGERY	32150	40150	48190
KS25-2312	REVISION FESS	34330	42920	51510
KS25-2313	TRANSCANAL TYMPANOPLASTY WITH CARTILAGE GRAFTING	29210	36520	43820

SURGICAL PROCEDURES

G.I. SURGERY / G.I. ONCOLOGY

Code	Description	IPD Charges Economy	Semi-Pvt	Pvt.
OESOPHAGUS				
KS25-2314	ACHLASIA CARDIA - MYOTOMY	27500	34370	41250
KS25-2315	CANCERS - IVOR-LEWIS	74840	81080	93550
KS25-2316	CANCERS - McKeons	74840	81080	93550
KS25-2317	CANCERS - RADICAL SURGERY	74840	81080	93550
KS25-2318	CANCERS - TRANSHIATAL DE	68610	74840	81080
KS25-2319	CORROSIVE STRICTURES - COLON TRANSPLANT	39040	48800	58570
KS25-2320	FOREIGN BODY IMPACTION - CERVICAL THORACOTOMY & REMOVAL	26040	32540	39040
KS25-2321	HIATUS HERNIA - FUNDOPLICATION - DIAPHRAGNYATIC HERNIA	28090	35110	42140
STOMACH (GASTRIC)				
KS25-2322	BEZOAR - REMOVAL	23670	29580	34490
KS25-2323	CANCER - BYPASS ONLY	37420	43660	49900
KS25-2324	CANCER - D2 GASTRECTOMY	62370	68610	74840
KS25-2325	CANCER - D3 GASTRECTOMY	62370	68610	74840
KS25-2326	CORROSIVE INJURY - BY PASS	18900	23620	28350
KS25-2327	CORROSIVE INJURY- RESECTION	24790	31000	37180
KS25-2328	PARTIAL / DISTAL GASTRECTOMY	37420	43660	49900
KS25-2329	PEPTIC ULCER - ANTRECTOMY	26040	32540	39040
KS25-2330	PEPTIC ULCER - HIGHLY SELECTIVE VAGOTOMY	20840	26040	31230
KS25-2331	PEPTIC ULCER - TV & GJ	19840	24790	29770
DUODENAL				
KS25-2332	DUODENAL BYPASS	20840	26040	31230
KS25-2333	PERIAMPULLARY CA - AMPULECTOMY	26040	32540	39040
KS25-2334	PERIAMPULLARY CA - BYPASS ONLY	49900	56130	62370
PANCREAS .				
KS25-2335	AC PANCREATITIS - NECROSECTOMY	52040	65040	78070
KS25-2336	CA HEAD - BYPASS	49900	56130	62370
KS25-2337	CA HEAD - WHIPPLES	87320	93550	99790
KS25-2338	CH PANCREATITIS - FREYS PROCEDURE	39040	48800	58570
KS25-2339	CH PANCREATITIS - LPH	31210	39030	46840
KS25-2340	DISTAL TUMOUR - DISTAL PANCREATECTOMY	49900	56130	62370
KS25-2341	PERIAMPULLARY CA - AMPULECTOMY	49900	56130	62370
KS25-2342	PERIAMPULLARY CA - BYPASS ONLY/TRIPPLE BYPASS	49900	56130	62370
KS25-2343	PERIAMPULLARY CA - WHIPPLES RESECTION	87320	93550	99790
KS25-2344	PSEUDOANEURYSMAL BLEED (POST PANCREATITIS) STABLE/UNSTABLE - EMBOLIZATION/SUGERY	39040	48800	58570
KS25-2345	PSEUDOCYST PANCREATIC FISTULA EXTERNAL - FISTULO JEJUNOSTOMY	24780	30990	37180
KS25-2346	PSEUDOCYST PANCREATIC FISTULA EXTERNAL - RESECTION	26040	32540	39040
KS25-2347	PSEUDOCYST PANCREATIC FISTULA INTERNAL - CYSTO-ENTEROSTOMY	24780	30990	37180
SMALL BOWEL SURGERY				
KS25-2348	OTHERS - RESECTION	24780	30990	37180
KS25-2349	TUMOR - RESECTION	31180	37420	43660
COLON				
KS25-2350	COLON CANCER - RADICAL HEMICOLECTOMY	43660	47400	52390
KS25-2351	PROCTOCOLECTOMY WITH ILIOANAL POUCH	39040	48800	58570
KS25-2352	RECTAL CANCER - ANTERIOR-RESECTION	52390	56130	62370
KS25-2353	RECTAL CANCER - LOW-ANT RESECTION	56130	59870	68610
KS25-2354	RECTAL CANCER - PELVIC EXENTRATION	56130	59870	68610
KS25-2355	RECTAL CANCER - ULTRA LOW-ANT RESECTION	56130	59870	68610

SURGICAL PROCEDURES

Code	Description	IPD Charges Economy	Semi-Pvt	Pvt.
LIVER.				
KS25-2356	CYST - SIMPLE,HYDATID - CYSTOPERICYSTECTOMY	28870	36090	43300
KS25-2357	HAEMANGIOMAS - ENUCLEATION/RESECTION	26040	32540	39040
KS25-2358	HEPATECTOMY	56130	62370	68610
KS25-2359	HEPATECTOMY - HEMI	39040	48800	58570
KS25-2360	HEPATECTOMY - LIMITED	29750	37180	44620
KS25-2361	INJURIES - RESECTIONAL SURGERY (CHARGE DEPENDING UPON SEVERITY OF INJURY/TYPE OF RESECTION)			
KS25-2362	PORTAL HYPERTENSION - DEVASCULARISATION	39040	48800	58570
KS25-2363	PORTAL HYPERTENSION - SHUNT	39040	48800	58570
KS25-2364	TUMOURS - HEPTATECTOMY - HEMIHEPATECTOMY	56130	62370	68610
KS25-2365	TUMOURS - HEPTATECTOMY - SEG II/III	37420	43660	49900
KS25-2366	TUMOURS - HEPTATECTOMY - TRISEGMENTECTOMY	99790	112270	123500
BILLARY				
KS25-2367	BENIGN STRICTURES - HEPTATICOJEJUNOSTOMY	29750	37180	44620
KS25-2368	CA GALL BLADDER - RADICAL CHOLECYSTECTOMY	62370	68610	74840
KS25-2369	CA GALL BLADDER (ADVANCED) - SEG. III BYPASS	49900	56130	62370
KS25-2370	CHOLANGIO-CA - REDICAL RESECTION	88470	93550	99790
KS25-2371	CHOLANGIO-CA - SEG. III BYPASS	49900	56130	62370
KS25-2372	CHOLDOCHAL CYST	29660	37100	44510
KS25-2373	INTRAHEPATIC STONES - MODIFIED HEPATICO-JEJUNOSTOMY	31210	39040	46870
KS25-2374	REC-BENIGN STRICTURES - HEPTATICOJEJUNOSTOMY	39040	48800	58570
OTHERS				
KS25-2375	G.I. SURGICAL ASSISTANCE FOR TRAUMA	26040	32540	39040
KS25-2376	TRAUMA (DEPENDING UPON TYPE / SEVERITY OF INJURY)			

Code	Description	Charges

DERMATOLOGY PROCEDURES

KS25-2377	AUTOIMPLANTATION OF WART	5500
KS25-2378	AUTOLOGOUS SERUM TRANSPLANT PER SESSION	5500
KS25-2379	BOTOS PER UNIT	500
KS25-2380	CHEMICAL CAUTERY (TCA Affliction)	1500
KS25-2381	CHEMICAL PEELING	2620
KS25-2382	SKIN BIOPSY / MUCOSAL BIOPSY	3150
KS25-2383	SKIN BIOPSY FOR HISTOPATHOLOGY	5510
KS25-2384	SKIN SCRAPPING FOR KOH PREPARATION	1050
KS25-2385	SLIT SMEAR FOR AFB	1050
KS25-2386	THREAD LIFTING OF FACE LOG THREAD PER SESSION	18000
KS25-2387	THREAD LIFTING OF FACE MONO THREAD PER SESSION	7000
KS25-2388	XANTHELASMA TREATMENT - A. CHEMICAL (PER SIDE)	1500
KS25-2389	XANTHELASMA TREATMENT - B. SURGICAL (PER SIDE)	2620
KS25-2390	XANTHELASMA TREATMENT - C. COMEDONE EXTRACTION	1050

CHEMICAL PEEL

KS25-2391	ADVANCE PEEL- Grade I Face (Inno)	7550
KS25-2392	ADVANCE PEEL -Grade II Face & Neck & Arms (Inno)	8330
KS25-2393	ADVANCE PEEL -Grade III Back/ Legs (Inno)	10750
KS25-2394	BASIC PEEL -Grade I Face (Glycolic/Saly / Lactic)	2700
KS25-2395	BASIC PEEL -Grade II Face & Neck (Glycolic/Saly /Lactic)	3580
KS25-2396	BASIC PEEL -Grade III Face; Neck & Decollate/Shoulder (Glycolic/Saly/ Lactic)	4360
KS25-2397	BASIC PEEL Grade IV Back/Lower Leg (Glycolic/Saly/ Lactic) /Arms	5840

MICRODERMABRASION

KS25-2398	MICRODERMABRASION -Grade III (Face and Neck)	3580
KS25-2399	MICRODERMABRASION -Grade IV (Face, Neck & Decollate/Shoulder)	4360
KS25-2400	MICRODERMABRASION -Grade IX (Half Leg)	4410
KS25-2401	MICRODERMABRASION -Grade V (Half Arm)	3310
KS25-2402	MICRODERMABRASION -Grade VI (Full Arm)	4410
KS25-2403	MICRODERMABRASION -Grade VII (Half back)	4410
KS25-2404	MICRODERMABRASION -Grade VIII (Full back)	5840
KS25-2405	MICRODERMABRASION -Grade X (Full leg)	5840
KS25-2406	MICRODERMABRASION -Grade XI (Thigh)	3850
KS25-2407	MICRODERMABRASION -Grade XII (Back of hand)	1870
KS25-2408	MICRODERMABRASION-Grade I (Full Face)	2700
KS25-2409	MICRODERMABRASION-Grade II (Neck)	1870

CHEMICAL CAUTERY (WART/SKIN TAG/MILIA/KOLLUSCUM)

KS25-2410	CHEMICAL CAUTERY (Few & Large)	3250
KS25-2411	CHEMICAL CAUTERY (Few & Small)	1650
KS25-2412	CHEMICAL CAUTERY (Many & Large)	4140
KS25-2413	CHEMICAL CAUTERY (Many & Small/ Large & Single)	2650

Code	Description	Charges
PODOWART APPLICATION		
KS25-2414	PODOWART APPLICATION (Few & Large)	3250
KS25-2415	PODOWART APPLICATION (Few & Small)	1650
KS25-2416	PODOWART APPLICATION (Many & Large)	4140
KS25-2417	PODOWART APPLICATION (Many & Small/ Large & Single)	2650
SURG. RF/ELECTROCAUTERY(WART/TAG/MILIA/KOLLUSCUM)		
KS25-2418	EC / RF LARGE AND FEW	6340
KS25-2419	EC / RF LARGE AND MANY	7820
KS25-2420	EC / RF LARGE AND MULTIPLE	9370
KS25-2421	EC / RF MEDIUM GRADE AREA (5-10 Lesions)	4140
KS25-2422	EC / RF SMALL & MANY (More than 20 Lesions)	9750
KS25-2423	EC / RF SMALL AND SINGLE	1650
KS25-2424	EC / RF SMALL GRADE AREA (<5 Lesions)	2650
CRYOTHERAPY		
KS25-2425	CRYOTHERAPY (Large and Few)	6340
KS25-2426	CRYOTHERAPY (Large and Many)	7820
KS25-2427	CRYOTHERAPY (Large and Multiple)	9370
KS25-2428	CRYOTHERAPY (More than 20 lesions)	9750
KS25-2429	CRYOTHERAPY (Small and Single)	1650
KS25-2430	CRYOTHERAPY Medium Grade area (5-10 lesions)	4140
KS25-2431	CRYOTHERAPY Small Grade area (<5 lesions)	2650
SURGICAL PROCEDURES		
KS25-2432	EAR LOBE REPAIR (Both)	17250
KS25-2433	EAR LOBE REPAIR (Single)	10970
KS25-2434	EAR LOBE REPAIR PIERCING	2040
KS25-2435	MOLE EXCISION (Per Mole)	4960
KS25-2436	NAIL EXCISION (Single)	5620
KS25-2437	NAIL EXCISION (Two)	9090
KS25-2438	PAIRING OF CORN (Single Large/ Small & Few)	2970
KS25-2439	PAIRING OF CORN (Single Large/ Small & Single)	1540
ACNE SCARS TREATMENTS		
KS25-2440	CROSS (More than 20 lesions)	9750
KS25-2441	CROSS MEDIUM GRADE AREA (5-10 lesions)	4140
KS25-2442	CROSS SMALL GRADE AREA (<5 lesions)	2650
KS25-2443	PUNCH EXCISION & LIFTING (More than 20 lesions)	9750
KS25-2444	PUNCH EXCISION & LIFTING -MEDIUM GRADE AREA (5-10 lesions)	4140
KS25-2445	PUNCH EXCISION & LIFTING -SMALL GRADE AREA (<5 lesions)	2650
KS25-2446	PUNCH EXCISION & SUTURING (More than 20 lesions)	9750
KS25-2447	PUNCH EXCISION & SUTURING MEDIUM GRADE AREA (5-10 lesions)	4140
KS25-2448	PUNCH EXCISION & SUTURING SMALL GRADE AREA (<5 lesions)	2650
KS25-2449	PUNCH GRAFTING (More than 20 lesions)	9750
KS25-2450	PUNCH GRAFTING MEDIUM GRADE AREA (5-10 lesions)	4140
KS25-2451	PUNCH GRAFTING SMALL GRADE AREA (<5 lesions)	2650
KS25-2452	SUBCISION (More than 20 lesions)	9750

Code	Description	Charges
KS25-2453	SUBCISION Medium Grade area (5-10 lesions)	4140
KS25-2454	SUBCISION Small Grade area (<5 lesions)	2650

SURGICAL DERMABRASION

KS25-2455	SURGICAL DERMABRASION -Grade 1 (Single Small Scar)	8210
KS25-2456	SURGICAL DERMABRASION -Grade 2 (Mid Face)	14280
KS25-2457	SURGICAL DERMABRASION -Grade 3 (Half Face)	18690
KS25-2458	SURGICAL DERMABRASION -Grade 4 (Full Face)	20890

INTRALESIONAL INJECTION

KS25-2459	INTRALESIONAL INJ. (Few & Large)	2370
KS25-2460	INTRALESIONAL INJ. (Many and Large)	6060
KS25-2461	INTRALESIONAL INJ. (Many and Medium)	4740
KS25-2462	INTRALESIONAL INJ. (Many and Small)	4020
KS25-2463	INTRALESIONAL INJ. (Single)	1710

MESOTHERAPY

KS25-2464	MESOTHERAPY (Extra Lightening Glutathione)	10470
KS25-2465	MESOTHERAPY (Grade -1)	4800
KS25-2466	MESOTHERAPY (Grade -2)	7160
KS25-2467	MESOTHERAPY (Grade -3)	9590
KS25-2468	MESOTHERAPY (Grade -4)	12180

LIPOLYTIC MESOTHERAPY

KS25-2469	MESOLIPO (DOUBLE CHIN) PER SESSION	4410

PRP TREATMENT

KS25-2470	MESO SCALP	2750
KS25-2471	PRP SCALP	11020
KS25-2472	PRP VAMPIRE FACE LIFT	13230

COLLAGEN INDUCTION THERAPY / MICRO NEEDLING

KS25-2473	COLLAGEN INDUCTION THERAPY / MICRO NEEDLING (Grade-1)	4800
KS25-2474	COLLAGEN INDUCTION THERAPY / MICRO NEEDLING (Grade-2)	7160
KS25-2475	COLLAGEN INDUCTION THERAPY / MICRO NEEDLING (Grade-3)	9590
KS25-2476	COLLAGEN INDUCTION THERAPY / MICRO NEEDLING (Grade-4)	12180

GLOW TREATMENT

KS25-2477	INSTA WOW SKIN RESURFACING THERAPY / PUMPKIN PEEL (Face, Neck & Upper Decollate)	16540
KS25-2478	PARTY GLOW PEEL	3310

CHEMOTHERAPY PROCEDURES

KS25-2479	ADJUVANT CHEMOTHERAPY	3500
KS25-2480	BCG INSTILLATION	4040
KS25-2481	CHEMOPORT FLUSHING	2360
KS25-2482	CHEMOTHERAPY (IT/INTRA VESICAL)	6000
KS25-2483	CHEMOTHERAPY IV PUSH	1000
KS25-2484	CHEMOTHERAPY LONG INFUSION >6 HRS	7000

Code	Description	Charges
KS25-2485	CHEMOTHERAPY LONG INFUSION 2 HRS	2500
KS25-2486	CHEMOTHERAPY LONG INFUSION 2-6 HRS	5000
KS25-2487	CHEMOTHERAPY PLANNING CHARGES	9000
KS25-2488	CHEMOTHERAPY PROTOCOL CHARGES	4000
KS25-2489	CHEMOTHERAPY SC OR IM ANTI NEOPLASTIC	1500
KS25-2490	CONCURRENT-CHEMORADIATION	2100
KS25-2491	HORMONAL THERAPY	1500
KS25-2492	INTRA VESICAL CHEMOTHERAPY	8590
KS25-2493	INTRA-ORAL COMBINATION CHEMOTHERAPY (PER DAY)	3010
KS25-2494	INTRA-PERITONEAL CHEMOTHERAPY	9020
KS25-2495	INTRA-PLEURAL CHEMOTHERAPY	9020
KS25-2496	INTRA-THECAL CHEMOTHERAPY	9020
KS25-2497	INTRA-VENOUS COMBINATION CHEMOTHERAPY (PER DAY)	3670
KS25-2498	MULTIPLE DRUGS CHEMOTHERAPY	3460
KS25-2499	NEOADJUVANT CHEMOTHERAPY	3500
KS25-2500	PICC LINE DRESSING	2500
KS25-2501	PICC LINE FLUSH	350
KS25-2502	RADIO FREQUENCY ABLATION	67280
KS25-2503	SINGLE DRUG CHEMOTHERAPY	3460
KS25-2504	TARGETED THERAPY CHEMOTHERAPY	3670
KS25-2505	USG GUIDED INTRAHEPATIC CHEMOTHERAPY	9030

Code	Description	Charges
	GASTROENTEROLOGY (ENDOSCOPIC) PROCEDURES	
KS25-2506	ACHALASIA DILATATION	17540
KS25-2507	ACHALASIA DILATATION (PAEDIATRIC)	20170
KS25-2508	ANORECTAL BIOFEEDBACK THERAPY	2160
KS25-2509	ANORECTAL MANOMETERY	11530
KS25-2510	ARGON PLASMA COAGULATION (APC)	12990
KS25-2511	ARGON PLASMA COAGULATION (APC) (PAED.)	14000
KS25-2512	BALLOON EXPULSION TEST	1360
KS25-2513	BANDING OF HAEMORRHOIDS	2970
KS25-2514	CAPSULE ENDOSCOPY (COST OF CAPSULE EXTRA)	21650
KS25-2515	CAPSULE ENDOSCOPY (PAEDIATRIC)	24900
KS25-2516	COLONOSCOPIC DECOMPRESSION	12620
KS25-2517	COLONOSCOPY LEFT SIDED	6780
KS25-2518	COLONOSCOPY LEFT SIDED (PAEDIATRIC)	7800
KS25-2519	COLONOSCOPY WHOLE	10590
KS25-2520	COLONOSCOPY WHOLE (Paediatric)	12290
KS25-2521	DIAGNOSTIC EUS (FOR CBD EVALUATION / PANCREAS)	24950
KS25-2522	DILATATION OF OESOPHAGIAL STRICTURE	13540
KS25-2523	DILATATION OF OESOPHAGIAL STRICTURE (PAEDIATRIC)	15570
KS25-2524	DILATATION OF STRICTURE	12350
KS25-2525	E.R.C.P. DIAGNOSTIC	17320
KS25-2526	E.S.T	11390
KS25-2527	EMR - ENDOSCOPIC MYCOSAL RESECTION (Coil/Clip Cost Extra)	39690
KS25-2528	ENCD - ENDOSCOPIC NASOCYSTIC DRAIN (Drain cost extra)	11340
KS25-2529	ENDOSCOPIC CYSTOGASTROSTOMY (Cost of Stent extra)	45240
KS25-2530	ENDOSCOPIC GLUE INJECTION	11540
KS25-2531	ENDOSCOPIC GLUE INJECTION (PAEDIATRIC)	13270
KS25-2532	ENDOSCOPIC NEROSECTOMY	22680
KS25-2533	ENDOSCOPIC PAPILIOTOMY WITH STONE EXTRACTION	26850
KS25-2534	ENDOSCOPIC PAPILIOTOMY WITH STONE EXTRACTION (PAEDIATRIC)	30880
KS25-2535	ENDOSCOPIC PAPILOTOMY	26360
KS25-2536	ENDOSCOPIC PLACEMENT OF ESOPHAGEAL/ENTERIC STENT	23920
KS25-2537	ENDOSCOPIC PLACEMENT OF ESOPHAGEAL/ENTERIC STENT (PAEDIATRIC)	27510
KS25-2538	ENDOSCOPIC PLACEMENT OF NASO - JEJUNAL TUBE	9210
KS25-2539	ENDOSCOPIC PLACEMENT OF NASO - JEJUNAL TUBE (PAEDIATRIC)	10590
KS25-2540	ENDOSCOPIC PLACEMENT OF R.T	6980
KS25-2541	ENDOSCOPIC PLACEMENT OF RYLES TUBE (PAEDIATRIC)	7640
KS25-2542	ENDOSCOPIC STENTING (COST OF STENT EXTRA)	29460
KS25-2543	ENDOSCOPIC STENTING (COST OF STENT EXTRA)-(PAEDIATRIC)	33880
KS25-2544	ENDOSCOPY EASY CLIPPING (HAEMOCLIPPING)	8660
KS25-2545	ENDOSCOPY EASY CLIPPING (HAEMOCLIPPING)-(PAEDIATRIC)	9960
KS25-2546	ENDOSCOPY STENT REMOVAL	9380
KS25-2547	ENDOSCOPY STENT REMOVAL (PAEDIATRIC)	10790
KS25-2548	ENTEROSCOPY	18060
KS25-2549	ERCP (PAEDIATRIC)	19930
KS25-2550	ERCP WITH STONE REMOVAL	21650
KS25-2551	ERCP WITH STONE REMOVAL (PAEDIATRIC)	24900

Code	Description	Charges		
KS25-2552	ESD (Endoscopic Submucosal Dissection)	50000		
KS25-2553	ESOPHAGEAL VARICEAL BANDING (PAEDIATRIC)	12480		
KS25-2554	EST (PAEDIATRIC)	13100		
KS25-2555	EUS GUIDED CELIAC PLEXUS BLOCK	22680		
KS25-2556	EUS GUIDED FNAB (ABDOMINAL LYMPH NODE/ CBD/ PANCREATIC MASS /ADRENAL MASS/ LIVER S	34020		
KS25-2557	EUS GUIDED FNAC (ABDOMINAL LYMPH NODE/ CBD/ PANCREATIC MASS /ADRENAL MASS/ LIVER S	22680		
KS25-2558	EUS GUIDED FNAC OF MEDIASTINAL LYMPH NODE	22680		
KS25-2559	EUS GUIDED GASTRIC VARIX GLUE INJECTION (Glue Cost extra)	22680		
KS25-2560	EUS GUIDED GASTRIC. VARIX GLUE INJECTION + COILING (Glue + Coil cost extra)	28350		
KS25-2561	EUS GUIDED LIVER BIOPSY	34020		
KS25-2562	EUS GUIDED PSEUDOCYST/WON DRAINAGE/ABSCESS DRAINAGE (Stent Cost Extra)	39690		
KS25-2563	EXAMINATION UNDER ANESTHESIA (PAEDIATRIC)	5850		
KS25-2564	F.B. REMOVAL (ENDOSCOPIC)	11390		
KS25-2565	F.B. REMOVAL (ENDOSCOPIC) -Paediatric	13500		
KS25-2566	FIBRO SCAN	6230		
KS25-2567	FIBRO SCAN (PAED.)	5500		
KS25-2568	FOREIGN BODY REMOVAL ENDOSCOPIC (PAEDIATRIC)	13100		
KS25-2569	GASTRIC VARICEAL GLUE INJECTION	13780		
KS25-2570	GASTRIC VARICEAL GLUE INJECTION (PAEDIATRIC)	15840		
KS25-2571	HEMOSPRAY APPLICATION	12860		
KS25-2572	HYDROGEN BREATH TEST	1010		
KS25-2573	INTRA GARTRIC BALLOON (Balloon Cost Extra)	17010		
KS25-2574	INTRA OPERATIVE ENTEROSCOPY	23720		
KS25-2575	LIVER BIOPSY	3670	4600	5510
KS25-2576	LIVER BIOPSY (PAED.)	5000		
KS25-2577	MECHANICAL LITHOTRIPSY	7180		
KS25-2578	N.B. DRAINAGE	22560		
KS25-2579	OESOPHAGEAL MANOMETEREY	8480		
KS25-2580	OESOPHAGEAL PH METRY	8480		
KS25-2581	OESOPHAGEAL VARICEAL BANDING	11390		
KS25-2582	OVER-THE-SCOPE-CLIP (OTSC) Application - (Cost of OTS Clip extra)	8340		
KS25-2583	P.E.G REPLACEMENT / EXCHANGE	3400		
KS25-2584	P.E.G.	13970		
KS25-2585	PEG REMOVAL	1430		
KS25-2586	PERCUTANEOUS ENDOSCOPIC GASTROSTOMY (PAEDIATRIC)	16070		
KS25-2587	PERORAL ENDOSCOPIC MYOTOMY (POEM) - (Pkg. for ICU-0 + 3 days ward)	114310	142880	171460
KS25-2588	PNEUMATIC DILATATION OF PYLORIC/ENTERIC STRICTURE	17540		
KS25-2589	PNEUMATIC DILATATION OF PYLORIC/ENTERIC STRICTURE (PAEDIATRIC)	20170		
KS25-2590	POLYPECTOMY (Gastro)	20500		
KS25-2591	POLYPECTOMY (Paediatric)	23570		
KS25-2592	RECTAL POLYPECTOMY (PAEDIATRIC)	7140		
KS25-2593	REMOVAL OF PEG TUBE/STENT (PAEDIATRIC)	1640		
KS25-2594	SB TUBE PLACEMENT	4860		
KS25-2595	SCLEROTHERAPY OF ULCER	10530		
KS25-2596	SCLEROTHERAPY OF ULCER (PAEDIATRIC)	12110		
KS25-2597	SENGSTAKEN BLACKMORE TUBE TEMPODE	4870		
KS25-2598	SIDE VIEWING ENDOSCOPY	8670		
KS25-2599	SIDE VIEWING ENDOSCOPY (PAEDIATRIC)	9970		

Code	Description	Charges
KS25-2600	SIGMOIDOSCOPY	3730
KS25-2601	SIGMOIDOSCOPY (Paediatric)	4290
KS25-2602	UGI ENDOSCOPY	6280
KS25-2603	UGI ENDOSCOPY (Emergency)	9720
KS25-2604	UGI ENDOSCOPY (Emergency) (PAED.)	9750
KS25-2605	UGI ENDOSCOPY (Paediatric)	7530

NOTE : If Required Anaesth. Charge Extra Rs.1860

NEONATAL & PAEDIATRIC INTENSIVE CARE

KS25-2606	ANAESTHESIA FEES FOR STAND BY (IN OT) (Paed.)	1650
KS25-2607	ANAESTHESIOLOGIST / SEDATION FEE FOR SHORT CASES/PROCEDURES (PAED.)	2090
KS25-2608	ANAESTHESIOLOGIST / SEDATION FEE HIGH RISK FOR SHORT PROCEDURES (PAED.)	3000
KS25-2609	ARTERIAL LINE / LEADER CATH (PAED.)	2530
KS25-2610	ASCITIC TAP - DIAGNOSTIC (PAED.)	1650
KS25-2611	ASCITIC TAP THROPETIC (PAED.)	2420
KS25-2612	BIPAP CHARGES (MACHINE OR VENTILATOR) (PAED.)	5000
KS25-2613	BONE MARROW ASPIRATION (Paed.)	3300
KS25-2614	BONE MARROW ASPIRATION+BONE BIOPSY (Paed.)	8250
KS25-2615	BONE MARROW BIOPSY (Paed.)	6050
KS25-2616	BRONCHOSCOPY FLEXIBLE (PAED.)	12420
KS25-2617	CARDIO VERSION / D.C. SHOCK (Paed.)	1650
KS25-2618	CHEST TUBE INSERTION	9420
KS25-2619	CONTINUOUS EEG MONITORING (PER DAY)	1500
KS25-2620	CPAP KIT CHARGES (As per actuals) - PAED.	
KS25-2621	CPAP SETUP/ HIGH FLOW NASAL CPAP MANAGEMENT (PAED.)	1890
KS25-2622	CPR (CARDIO-PULMONARY RESUCIATION)/EMERGENCY RESUSCITATION MORE THAN 30 MINTS (P	4030
KS25-2623	DAILY CPAP CHARGES / BIPAP / HFNC (PAED.)	2380
KS25-2624	ENDOTRACHEAL INTUBATION, ORAL/EXTUBATION DRILL (Paed.)	1700
KS25-2625	ENDOTRACHIAL INTUBATION (PAED.)	1420
KS25-2626	EXCHANGE TRANSFUSION (PAED.)	10410
KS25-2627	GASTRIC LAVAGE (Paed.)	2200
KS25-2628	HIGH FLOW NASAL CPAP (PAED.)	2920
KS25-2629	HIGH FREQUENCY VENTILATOR CHARGE - PER DAY (Pead.)	10630
KS25-2630	HIGH FREQUENCY VENTILATOR MANAGEMENT (Pead.)	3000
KS25-2631	ICP MONITORING (Paed.)	4950
KS25-2632	INTRA PLEURAL FIBRINOLYSIS - PER SESSION (Paed.)	3000
KS25-2633	INTRATHECAL INJECTION (Paed.)	2820
KS25-2634	JUGULAR / SUBCLAVIAN /FEMORAL / CENTRAL VENOUS LINE (PAED.)	4770
KS25-2635	KIDNEY BIOPSY (Paed.)	7700
KS25-2636	LIVER ABSCESS ASPIRATION (Paed.)	5500
KS25-2637	LUMBAR PUNCTURE (PAED.)	5070
KS25-2638	LUMBAR PUNCTURE WITH MANOMETRY (Paed.)	5500
KS25-2639	PARTIAL EXCHANGE TRANSFUSION (PAED.)	3290
KS25-2640	PEADIATRIC BEDSIDE SOFT PD CATHETER	15000
KS25-2641	PERICARDIAL TAPPING (Paed.)	9900
KS25-2642	PERITONEAL DIALYSIS (PICU) DAILY CHARGES	4000

Code	Description	Charges
KS25-2643	PERITONEAL DIALYSIS PER 24 HRS - INITATION (PAED.)	12380
KS25-2644	PERITONEAL DIALYSIS PER 24 HRS - MANIPULATION (PAED.)	4180
KS25-2645	PICC LINE (Paed.)	4400
KS25-2646	PLEURAL TAP - DIAGNOSTIC (PAED.)	1800
KS25-2647	PULSE OXYMETER/ APNOEA MONITOR (PAED.)	780
KS25-2648	RADIANT WARMER/ PHOTOTHERAPY (IN PATIENTS ROOM) (PAED.)	1650
KS25-2649	RADIANT WARMER/ PHOTOTHERAPY (PAED.)	790
KS25-2650	RESUSCITATION (PAED.)	2370
KS25-2651	SURFACTANT INSTILLATION/ THERAPY (PAED.)	4030
KS25-2652	UMBLICAL ARTERY CATHETERIZATION (Paed.)	3000
KS25-2653	UMBLICAL VEIN CATHETERIZATION (Paed.)	3000
KS25-2654	US GUIDED VASCULAR ACCESS (PER PROCEDURE) - (PAED.)	670
KS25-2655	VENTILATORY MANAGEMENT (PAED.)	2490

NEPHROLOGY PROCEDURES

Code	Description	IPD Charges Economy	Semi Private	Private
KS25-2656	A.V. FISTULA UPPER - ARM (TO BE DONE IN O.T.)	18700	23390	28070
KS25-2657	A.V. SHUNT / FISTULA FORE - ARM (TO BE DONE IN O.T.)	14950	18700	22440
KS25-2658	AV FISTULA REMOVAL	8170	10090	12240
KS25-2659	AV SHUNT REMOVAL	10090	11140	12620
KS25-2660	CAPD (Per cutaneous special procedure OT)\FLUROSCOPY	30200	37770	45330
KS25-2661	CAPD CATHETER REMOVAL	12620	15600	18710
KS25-2662	CAPD CATHETERIZATION PACKAGE (O.T.)	31350	39180	47030
KS25-2663	CAPD TRAINING/SUPERVISION CHARGES	9750	12170	14590
KS25-2664	CRRT CHARGES PER DAY (Consumables charges as actuals)	23100	23100	23100
KS25-2665	CRRT CHARGES PER DAY (Consumables charges as actuals) (PAED.)	26470	26470	26470
KS25-2666	CVVH (CONTINUOUS VENOVENOUS HEMOFILTRATION)	9660	11140	12620
KS25-2667	CVVH (CONTINUOUS VENOVENOUS HEMOFILTRATION) (PAED.)	11110	12810	14510
KS25-2668	DLC INTERNAL JUGULAR/SUBCLAVIAN	6380	7850	9200
KS25-2669	DLC INTERNAL JUGULAR/SUBCLAVIAN (PAED.)	7340	9030	10570
KS25-2670	DOUBLE LUMEN CATHETER - MINOR (O.T.) /FEMORAL	5350	6690	8030
KS25-2671	DOUBLE LUMEN CATHETER - MINOR (O.T.) /FEMORAL (PAED.)	6150	7700	9240
KS25-2672	FEMORAL CATHETERIZATION	3570	4460	5370
KS25-2673	GRAFT BIOPSY - U/S GUIDED	7010	8770	10540
KS25-2674	HAEMODIALYSIS - ROUTINE (Bi-Carbonate Dialysis)	5110	5110	5110
KS25-2675	HAEMODIALYSIS - ROUTINE (Bi-Carbonate Dialysis) (PAED.)	5880	5880	5880
KS25-2676	KIDNEY BIOPSY - U/S GUIDED	6000	7520	9030
KS25-2677	KIDNEY BIOPSY - U/S GUIDED (PAED.)	6900	8640	10380
KS25-2678	MICTURATING CYSTOURETHROGRAM (UNDER C-ARM)	3150	3710	4440
KS25-2679	PEDIATRIC RENAL BIOPSY	8400	10500	12600
KS25-2680	PERITONEAL DIALYSIS (to be done in ICU/CCU)	8000	8000	8000
KS25-2681	PERITONEAL DIALYSIS (to be done in ICU/CCU) (PAED.)	9200	9200	9200
KS25-2682	PERMA. CATH PLACEMENT (OT Procedure)	16740	20910	25110
KS25-2683	PERMA. CATH PLACEMENT (OT Procedure) (PAED.)	19250	24040	28870
KS25-2684	PERMACATH REMOVAL	7640	9660	11510
KS25-2685	PERMACATH REMOVAL (PAED.)	8790	11110	13230
KS25-2686	PLASMA PHERESIS (DIALYSIS)	10690	10690	10690
KS25-2687	PLASMA PHERESIS (DIALYSIS) (PAED.)	12300	12300	12300
KS25-2688	SCUF (SLOW CONTINUOUS ULTRAFILTRATION)	10980	10980	10980
KS25-2689	SCUF (SLOW CONTINUOUS ULTRAFILTRATION) (PAED.)	12630	12630	12630
KS25-2690	SLED (SLOW LOW EFFICIENCY DIALYSIS)	10380	10380	10380
KS25-2691	SLED (SLOW LOW EFFICIENCY DIALYSIS) (PAED.)	11940	11940	11940

Code	Description	IPD Charges Economy	Semi Private	Private
	ANAESTHESIOLOGY & INTENSIVE CARE			
KS25-2692	ANAESTHESIOLOGIST FEE FOR DEFINITIVE OPERATION/PROCEDURE (30% OF SURGEON FEE)			
KS25-2693	ANAESTHESIOLOGIST FEE FOR HIGH RISK CASES (MORE THAN ONE ANAEST.) - 20% ADDITIONAL TO SURGEON FEE			
KS25-2694	ANAESTHESIOLOGIST FEE FOR SHORT CASES/PROCEDURES	2210	2210	2210
KS25-2695	ANAESTHESIOLOGIST FEE FOR STAND BY DOCTOR/MONITORED ANAESTHESIA CARE (20% OF SURGEON FEE)			
KS25-2696	ARTERIAL LINE INSERTION CANNULATION / LEADER CATH INSERTION	2170	2680	3230
KS25-2697	BIPAP CHARGES	5000	5000	5000
KS25-2698	BIPAP-VENTILATOR CHARGES	9050	9050	9050
KS25-2699	BRONCHOFLEX CHARGE	7500	9380	11250
KS25-2700	C.V.P. LINE INSERTION	2170	2680	3230
KS25-2701	CARDIO VERSION / D.C. SHOCK	1140	1430	1730
KS25-2702	CAUDAL EPIDURAL	2050	2520	3020
KS25-2703	CODE BLUE CHARGES	4270	4270	4270
KS25-2704	CPR CHARGES(CARDIO-PULMONARY RESUCIATION)/EMERGENCY RESUSCITATION MORE THAN 30 MINUTES	4270	4270	4270
KS25-2705	DVT PUMP CHARGES	640	640	640
KS25-2706	ECMO INITIATION	389070	389070	389070
KS25-2707	ECMO MAINTENANCE CHARGE	113670	113670	113670
KS25-2708	ENDOTRACHEAL INTUBATION NASAL	1510	1880	2270
KS25-2709	ENDOTRACHEAL INTUBATION, ORAL/EXTUBATION DRILL	1300	1620	1940
KS25-2710	ENTERAL FEEDING PUMP (PER DAY)	510	510	510
KS25-2711	EPIDURAL CANNULATION/CATHETERIZATION	4650	5860	7010
KS25-2712	HIGH FLOW NASAL CPAP (PER DAY)	3080	3080	3080
KS25-2713	IMAGE INTENSIFER CHARGES - SHORT PROCEDURE	2600	3230	3880
KS25-2714	IMAGE INTENSIFIER CHARGES - LONG PROCEDURE	4280	5330	6410
KS25-2715	INTENSIVIST FEES FOR CT /MRI	2080	2080	2080
KS25-2716	JUGULAR LINE/SUBCLAVIAN LINE	4050	5040	6060
KS25-2717	LABOUR ANALGESIA / EPIDURAL (Including Consumables & Drugs)	11860	14830	17800
KS25-2718	LUMBAR PUNCTURE	4170	5190	6260
KS25-2719	MEDICAL/COMPRESSED AIR IN O.T PER CASE UPTO 4 HRS.	640	640	640
KS25-2720	MEDIGEL PRONE POSITION	1410	1410	1410
KS25-2721	NERVE BLOCK FOR PAIN RELIEF (FOR SINGLE INJECTION)	900	1110	1340
KS25-2722	OXYGEN & NITROUS OXIDE IN O.T/HOUR	1300	1300	1300
KS25-2723	OXYGEN (O.T.)/HOUR	200	200	200
KS25-2724	OXYGEN CHARGES (When consumed through BI-PAP machine) - PER DAY	3680	3680	3680
KS25-2725	OXYGEN CHARGES (When consumed through mask/nasal prongs) - PER DAY	3390	3390	3390
KS25-2726	OXYGEN CHARGES (When consumed through ventilator) - PER DAY	3960	3960	3960
KS25-2727	PAC CHARGES	850	990	1190
KS25-2728	PAC CHARGES (OPD)	1130	1130	1130
KS25-2729	PAINLESS A DELIVERY UNDER EPIDURAL ANAESTHESIA	10660	10660	10660
KS25-2730	PCS (DVT) PUMP (Per Day)	640	640	640
KS25-2731	PULSE OXIMETER/MONITOR CHARGES (ROOM) - PER DAY	810	810	810
KS25-2732	RIPPLE BED / ALPHA BED / WATER BED PER DAY	510	510	510
KS25-2733	RRT CHARGES	1500	1750	2500
KS25-2734	SYRINGE PUMP CHARGES (PER DAY)	510	510	510
KS25-2735	USG GUIDED ARTERIAL LINE INSERTION	2540	3180	3810
KS25-2736	USG GUIDED CVP LINE INSERTION	2540	3020	3540

Code	Description	IPD Charges		
		Economy	Semi Private	Private
KS25-2737	USG GUIDED HD CATHERTER INSERTION	6500	8130	9750
KS25-2738	USG GUIDED PLEURAL/ASCITIC TAPPING (DIAGNOSTIC)	1930	2410	2900
KS25-2739	USG GUIDED PLEURAL/ASCITIC TAPPING (THERAPEUTIC)	2860	3580	4290
KS25-2740	VENTILATOR CHARGES (MICRO PROCESSOR) PER DAY	10630	10630	10630
KS25-2741	VENTILATOR CHARGES (MINI VENTILATOR) PER DAY	5770	5770	5770
KS25-2742	VENTILATOR MANAGEMENT/RESPIRATORY MANAGEMENT	2090	2630	3120

Note : - ECMO Maintenance Charges aplicable at the time of ECMO Initiation and there after weekly basis.

Code	Description	Charges

PHYSIOTHERAPY

OPD CHARGES

KS25-2743	ANKLE JOINT (PHYSIOTHERAPY)	520
KS25-2744	ANTE NATAL EXERCISES (PHYSIOTHERAPY)	450
KS25-2745	ANTE NATEL AND POST NATEL (12 CLASSES)	3510
KS25-2746	BELLS PALSY (PHYSIOTHERAPY)	610
KS25-2747	BRACHIAL PLEXUS INJURY (PHYSIOTHERAPY)	610
KS25-2748	BREATHING EXERCISE & POSTURL DRAINAGE (PHYSIOTHERAPY)	450
KS25-2749	BURNS (PHYSIOTHERAPY)	640
KS25-2750	C.P.M.	330
KS25-2751	CERVICAL EXERCISE	330
KS25-2752	CERVICAL SPONDYLOSIS (PHYSIOTHERAPY)	520
KS25-2753	CHEST PHYSIOTHERAPY	450
KS25-2754	COLD PACK (PHYSIOTHERAPY)	350
KS25-2755	COLD PACK BACK	350
KS25-2756	COLD PACK LEFT WRIST	350
KS25-2757	COLD PACK LT ANKLE	350
KS25-2758	COLD PACK LT ELBOW	350
KS25-2759	COLD PACK LT KNEE	350
KS25-2760	COLD PACK LT SHOULDER	350
KS25-2761	COLD PACK NECK	350
KS25-2762	COLD PACK RIGHT WRIST	350
KS25-2763	COLD PACK RT ANKLE	350
KS25-2764	COLD PACK RT ELBOW	350
KS25-2765	COLD PACK RT KNEE	350
KS25-2766	COLD PACK RT SHOULDER	350
KS25-2767	COMBINATION THERAPY (PHYSIOTHERAPY)	430
KS25-2768	COMBINATION THERAPY BACK	430
KS25-2769	COMBINATION THERAPY LEFT ANKLE	430
KS25-2770	COMBINATION THERAPY LEFT ELBOW	430
KS25-2771	COMBINATION THERAPY LEFT KNEE	430
KS25-2772	COMBINATION THERAPY LEFT WRIST	430
KS25-2773	COMBINATION THERAPY LT SHOULDER	430
KS25-2774	COMBINATION THERAPY NECK	380
KS25-2775	COMBINATION THERAPY RIGHT ANKLE	430
KS25-2776	COMBINATION THERAPY RIGHT ELBOW	430
KS25-2777	COMBINATION THERAPY RIGHT KNEE	430
KS25-2778	COMBINATION THERAPY RIGHT WRIST	430
KS25-2779	COMBINATION THERAPY RT SHOULDER	430
KS25-2780	COMBINED LUMBER & CERVICAL (PHYSIOTHERAPY)	930
KS25-2781	CONTINUOUS PASSIVE MOVEMENT - CPM (PHYSIOTHERAPY)	350
KS25-2782	CVA (PHYSIOTHERAPY)	610
KS25-2783	ELBOW JOINT (PHYSIOTHERAPY)	520
KS25-2784	ELECTRIC VIBRATOR (PHYSIOTHERAPY)	350
KS25-2785	ELECTRIC/MECHANICALTRACTION (PHYSIOTHERAPY)	350

Code	Description	Charges
KS25-2786	ELECTRICAL STIMULATION(THERSPEUTIC) (PHYSIOTHERAPY)	380
KS25-2787	ELETRO THERAPY (PHYSIOTHERAPY)	430
KS25-2788	FARADIC FOOT BATH	430
KS25-2789	FAREDIC STIMULATION	430
KS25-2790	FASCIAL EXERCISE	330
KS25-2791	FINGER EXERCISE	350
KS25-2792	FOOT & TOES (PHYSIOTHERAPY)	520
KS25-2793	FOOT PHYSIOTHERAPY	380
KS25-2794	GAIT TRAINING (PHYSIOTHERAPY)	450
KS25-2795	HAMSTRINGS STRETCHING EXERCISE	350
KS25-2796	HEMIPLEGIA (PHYSIOTHERAPY)	610
KS25-2797	HIP JOINTS (PHYSIOTHERAPY)	520
KS25-2798	HOT PACK (PHYSIOTHERAPY)	330
KS25-2799	HOT PACK BACK	330
KS25-2800	HOT PACK LT ELBOW	350
KS25-2801	HOT PACK LT HIP	350
KS25-2802	HOT PACK LT KNEE	330
KS25-2803	HOT PACK LT SHOULDER	330
KS25-2804	HOT PACK LT WRIST	350
KS25-2805	HOT PACK NECK	330
KS25-2806	HOT PACK RT ELBOW	330
KS25-2807	HOT PACK RT HIP	350
KS25-2808	HOT PACK RT KNEE	330
KS25-2809	HOT PACK RT SHOULDER	330
KS25-2810	HOT PACK RT WRIST	330
KS25-2811	IFT ANTERIOR	430
KS25-2812	IFT BACK	380
KS25-2813	IFT LEFT ANKLE	430
KS25-2814	IFT LEFT ELBOW	430
KS25-2815	IFT LEFT HIP	430
KS25-2816	IFT LT KNEE	380
KS25-2817	IFT LT SHOULDER	380
KS25-2818	IFT NECK	380
KS25-2819	IFT POSTERIOR	430
KS25-2820	IFT RIGHT ANKLE	380
KS25-2821	IFT RIGHT ELBOW	430
KS25-2822	IFT RIGHT HIP	430
KS25-2823	IFT RT KNEE	380
KS25-2824	IFT RT SHOULDER	380
KS25-2825	INFRA RED (PHYSIOTHERAPY)	430
KS25-2826	INTERFARENTIAL THERAPY (IFT) (PHYSIOTHERAPY)	380
KS25-2827	INTERMITTENT CERVICAL TRACTION - (ICT) (PHYSIOTHERAPY)	330
KS25-2828	INTERMITTENT LUMBAR TRACTION - (ILT) (PHYSIOTHERAPY)	330
KS25-2829	INTRA LUMBAR TRACTION (PHYSIOTHERAPY)	350
KS25-2830	ISOMETRIC NECK EXERCISE	350
KS25-2831	KNEE JOINT (PHYSIOTHERAPY)	520
KS25-2832	LASER LT WRIST	430
KS25-2833	LASER (PHYSIOTHERAPY)	380

Code	Description	Charges
KS25-2834	LASER BACK	380
KS25-2835	LASER FASCIAL STIMULATION	380
KS25-2836	LASER LEFT HEEL	380
KS25-2837	LASER LT ANKLE	380
KS25-2838	LASER LT ELBOW	380
KS25-2839	LASER LT KNEE	380
KS25-2840	LASER LT SHOULDER	380
KS25-2841	LASER NECK	430
KS25-2842	LASER RIGHT HEEL	380
KS25-2843	LASER RT ANKLE	430
KS25-2844	LASER RT ELBOW	380
KS25-2845	LASER RT KNEE	380
KS25-2846	LASER RT SHOULDER	380
KS25-2847	LASER RT WRIST	430
KS25-2848	LASER T.M. JOINT LEFT SIDE	430
KS25-2849	LASER T.M. JOINT RIGHT SIDE	430
KS25-2850	LT ANKLE MOBILIZATION EXERCISE	330
KS25-2851	LT ELBOW EXERCISE	330
KS25-2852	LT KNEE BANDING EXERCISE	350
KS25-2853	LT KNEE EXERCISE	330
KS25-2854	LT LOWER LIMB EXERCISE	330
KS25-2855	LT SHOULDER MOBILIZATION EXERCISE	330
KS25-2856	LT UPPER LIMB EXERCISE	330
KS25-2857	LT WRIST EXERCISE	330
KS25-2858	LUMBAGO (PHYSIOTHERAPY)	520
KS25-2859	LUMBAR SPONDYLOSIS (PHYSIOTHERAPY)	520
KS25-2860	LYMPHAPRESS THERAPY	420
KS25-2861	LYMPHATIC MASSAGE	590
KS25-2862	LYMPHEDEMA EXERCISES	450
KS25-2863	LYMPHNODE ACTIVATION MANIPULATION	450
KS25-2864	MANUAL LYMPHATIC DRAINAGE	470
KS25-2865	MANUAL LYMPHATIC MASSAGE	450
KS25-2866	MANUAL MUSCLE TESTING (PHYSIOTHERAPY)	640
KS25-2867	MISC. & LEARNING EXERCISES (PHYSIOTHERAPY)	430
KS25-2868	MISC.(RT. U.L. & RT. L.L.EXERCISES) (PHYSIOTHERAPY)	610
KS25-2869	MUSCLE SIMULATORS (PHYSIOTHERAPY)	430
KS25-2870	MUSCLE TESTING AND DIAGNOSTIC (PHYSIOTHERAPY)	640
KS25-2871	MYO-FASCIAL RELEASE	420
KS25-2872	NERVE & MUSCLE STIMULATOR (PHYSIOTHERAPY)	430
KS25-2873	NERVE INJURIES (PHYSIOTHERAPY)	520
KS25-2874	OBESITY EXERCISE (PHYSIOTHERAPY)	430
KS25-2875	ONCO MOUTH OPENING EXERCISES	450
KS25-2876	ONCOLOGY REHAB VISIT	820
KS25-2877	OSTEO ARTHRITIS (PHYSIOTHERAPY)	520
KS25-2878	PARAFFIN WAX BATH (PWB) (PHYSIOTHERAPY)	350
KS25-2879	PARAPLEGIA (PHYSIOTHERAPY)	640
KS25-2880	PERI ARTHRITIS (PHYSIOTHERAPY)	520
KS25-2881	PERINIAL EXERCISES	450

Code	Description	Charges
KS25-2882	PHYSIOTHERAPY - MUSCLE CHARTING - 1 LIMB	350
KS25-2883	PHYSIOTHERAPY - MUSCLE CHARTING - 2 LIMBS	520
KS25-2884	PHYSIOTHERAPY - MUSCLE CHARTING - 3 LIMBS	640
KS25-2885	PHYSIOTHERAPY - MUSCLE CHARTING - 4 LIMBS	640
KS25-2886	PHYSIOTHERAPY - SD CURVE FOR ONE NERVE	430
KS25-2887	PHYSIOTHERAPY - SD CURVE FOR TWO NERVES	430
KS25-2888	PHYSIOTHERAPY FOR GUIDED EXERCISE	430
KS25-2889	PNEUMATIC COMPRESSION	420
KS25-2890	POST - POLIO EXERCISE (PHYSIOTHERAPY)	380
KS25-2891	POST NATAL (PHYSIOTHERAPY)	430
KS25-2892	POST SURGICAL REHABILITATION	610
KS25-2893	PWB - LEFT SHOULDER	350
KS25-2894	PWB - RIGHT SHOULDER	350
KS25-2895	PWB LEFT HEEL	330
KS25-2896	PWB LT ANKLE	330
KS25-2897	PWB LT ELBOW	330
KS25-2898	PWB LT KNEE	330
KS25-2899	PWB LT THUMB	350
KS25-2900	PWB LT WRIST	330
KS25-2901	PWB RIGHT HEEL	330
KS25-2902	PWB RT ANKLE	330
KS25-2903	PWB RT ELBOW	330
KS25-2904	PWB RT KNEE	330
KS25-2905	PWB RT THUMB	350
KS25-2906	PWB RT WRIST	330
KS25-2907	QUADICOPH EXERCISE LT KNEE	330
KS25-2908	QUADICOPH EXERCISE RT KNEE	330
KS25-2909	QUADRICEPS EXERCISE LEFT KNEE	330
KS25-2910	QUADRICEPS EXERCISE RIGHT KNEE	330
KS25-2911	QUARDRIPLEGIA (PHYSIOTHERAPY)	760
KS25-2912	REHABILATION PROGRAM FOR PAIN MANAGEMENT	880
KS25-2913	REHABILATION PROGRAM FOR PARALYSIS	990
KS25-2914	REHABILATION PROGRAM FOR POST SURGICAL PATIENT	990
KS25-2915	REHABILATION PROGRAM FOR TRAUMA PATIENT	990
KS25-2916	RHEUMATOID ARTHRITIS (PHYSIOTHERAPY)	520
KS25-2917	ROM (LEFT SHOULDER)	350
KS25-2918	ROM (NECK)	350
KS25-2919	ROM (RIGHT KNEE)	350
KS25-2920	ROM (RIGHT SHOULDER)	350
KS25-2921	ROM EXERCISE	330
KS25-2922	ROM(BACK)	350
KS25-2923	ROM(LEFT KNEE)	350
KS25-2924	RT ANKLE MOBILIZATION EXERCISE	330
KS25-2925	RT ELBOW EXERCISE	330
KS25-2926	RT KNEE BANDING EXERCISE	350
KS25-2927	RT KNEE EXERCISE	330
KS25-2928	RT LOWER LIMB EXERCISE	330
KS25-2929	RT SHOULDER MOBILIZATION EXERCISE	330

Code	Description	Charges
KS25-2930	RT UPPER LIMB EXERCISE	330
KS25-2931	RT WRIST EXERCISE	330
KS25-2932	S.W. DIATHERMY (PHYSIOTHERAPY)	350
KS25-2933	SHORT WAVE DIATHERMY - SWD (PHYSIOTHERAPY)	350
KS25-2934	SHOULDER JOINT (PHYSIOTHERAPY)	520
KS25-2935	SIX MINUTES WALK TEST	590
KS25-2936	SPINAL EXERCISE	330
KS25-2937	SPINAL EXTENSION EXERCISE	350
KS25-2938	SPINAL FLORAION EXERCISE	350
KS25-2939	STROKE REHABILITATION (30 DAYS)	10530
KS25-2940	SWALLOWING EXERCISES	450
KS25-2941	SWD (PHYSIOTHERAPY)	330
KS25-2942	SWD BACK	330
KS25-2943	SWD LT ANKLE	350
KS25-2944	SWD LT HIP	350
KS25-2945	SWD LT KNEE	330
KS25-2946	SWD LT SHOULDER	330
KS25-2947	SWD NECK	330
KS25-2948	SWD RT ANKLE	350
KS25-2949	SWD RT HIP	350
KS25-2950	SWD RT KNEE	330
KS25-2951	SWD RT SHOULDER	330
KS25-2952	TENS (PHYSIOTHERAPY)	380
KS25-2953	TENS BACK	380
KS25-2954	TENS LT KNEE	380
KS25-2955	TENS LT SHOULDER	380
KS25-2956	TENS NECK	380
KS25-2957	TENS RT KNEE	380
KS25-2958	TENS RT SHOULDER	380
KS25-2959	TREATMENAT FOR 3 OR MORE JOINT (PER SITTING)	910
KS25-2960	ULTRASONIC THERAPY (PHYSIOTHERAPY)	330
KS25-2961	ULTRASONIC THERAPY BACK	330
KS25-2962	ULTRASONIC THERAPY LT ANKLE	330
KS25-2963	ULTRASONIC THERAPY LT ELBOW	330
KS25-2964	ULTRASONIC THERAPY LT HEEL	330
KS25-2965	ULTRASONIC THERAPY LT HIP	350
KS25-2966	ULTRASONIC THERAPY LT KNEE	330
KS25-2967	ULTRASONIC THERAPY LT SHOULDER	330
KS25-2968	ULTRASONIC THERAPY LT THUMB	350
KS25-2969	ULTRASONIC THERAPY LT WRIST	330
KS25-2970	ULTRASONIC THERAPY NECK	330
KS25-2971	ULTRASONIC THERAPY RT ANKLE	330
KS25-2972	ULTRASONIC THERAPY RT ELBOW	330
KS25-2973	ULTRASONIC THERAPY RT HEEL	330
KS25-2974	ULTRASONIC THERAPY RT KNEE	330
KS25-2975	ULTRASONIC THERAPY RT SHOULDER	330
KS25-2976	ULTRASONIC THERAPY RT THUMB	350
KS25-2977	ULTRASONIC THERAPY RT WRIST	330

Code	Description	Charges
KS25-2978	ULTRASONIC THERAPY T.M. JOINT LEFT SIDE	350
KS25-2979	ULTRASONIC THERAPY T.M. JOINT RIGHT SIDE	330
KS25-2980	UPPER ARM (PHYSIOTHERAPY)	350
KS25-2981	VESTIBULAR REHAB	590
KS25-2982	WAX BATH (PHYSIOTHERAPY)	330
KS25-2983	WRIST JOINT & FINGERS (PHYSIOTHERAPY)	330

Second and Subsequent modalities will be charged at 50% of the above rates.

SPEECH THERAPY & AUDIOLOGY

KS25-2984	AUDIOLOGY - TINNITUS EVACUATION	900
KS25-2985	AUDIOMETRY - ABLB	1000
KS25-2986	AUDIOMETRY - AIDED AUDIMETRY	1000
KS25-2987	AUDIOMETRY - HEARING AID TRIAL	1300
KS25-2988	AUDIOMETRY - PURE TONE TESTING	1300
KS25-2989	AUDIOMETRY - SPECIAL TEST (TONE DECAY TEST)	700
KS25-2990	AUDIOMETRY - SPECIAL TEST SISI	700
KS25-2991	AUDIOMETRY - SPEECH AUDIOMETERY	700
KS25-2992	AUDITORY STEADY STATE RESPONSE (ASSR)	4800
KS25-2993	BERA TEST	4700
KS25-2994	ECochG (ECOG) TESTING (Electrocochleography)	8000
KS25-2995	EUSTACHIAN TUBE FUNCTION TEST	1400
KS25-2996	HEARING AID PROGRAMMING	3600
KS25-2997	IMPEDANCE AUDIOMETRY (TYMPANOGRAM)	1400
KS25-2998	IMPEDANCE REFLEX TEST	1000
KS25-2999	OAE TEST	1500
KS25-3000	SPEECH ASSESSMENT FOR ADULT	1400
KS25-3001	SPEECH ASSESSMENT FOR CHILD	1400
KS25-3002	SPEECH THERAPY CONSULTATION	1200
KS25-3003	SPEECH THERAPY PER SITTING	1200
KS25-3004	TINNITUS RETRAINING THERAPY PER SITTING	900
KS25-3005	VESTIBULAR EXERCISE	1100

ADULT PSYCHIATRY & PSYCHOTHERAPY

Code	Description	IPD Charges Economy	Semi Private	Private
KS25-3006	CAREER COUNSELLING	1900	1900	1900
KS25-3007	COGNITIVE BEHAVIOUS THERAPY	1950	1950	1950
KS25-3008	COUNSELLING / THERAPY	1500	1500	1500
KS25-3009	COUNSELLING SESSION (30 MINUTES) BY PSYCHIATRIST	3400	4250	5100
KS25-3010	COUNSELLING SESSION (40 MINUTES) BY PSYCHIATRIST	2170	2710	3250
KS25-3011	COUPLE THERAPHY (1ST SESSION)	3230	3230	3230
KS25-3012	COUPLE THERAPHY (SUBSEQUENT)	2450	2450	2450
KS25-3013	D.S.T. TEST	2890	3610	4340
KS25-3014	INDIVIDUAL PSYCHOTHERAPY (20 Minutes)	2020	2520	3020
KS25-3015	MARITAL COUNSELLING (1ST SESSION)	3230	3230	3230
KS25-3016	MARITAL COUNSELLING (SUBSEQUENT)	2450	2450	2450
KS25-3017	MODIFIED E.C.T (Psychiatrist)	5010	6280	7530
KS25-3018	NARCO ANALYSIS (Psychiatrist)	3860	4840	5810
KS25-3019	PSYCHOSEXUAL INDIVIDUAL THERAPHY	1950	1950	1950
KS25-3020	PSYCHOTHERAPY FAMILY (40 MINUTES) BY PSYCHIATRIST	2480	3080	3710
KS25-3021	PSYCHOTHERAPY INDIVIDUAL (40 MINUTES) BY PSYCHIATRIST	3360	4200	5050
KS25-3022	V.S.M.S. TEST	2680	3350	4020

A. CLINICAL PSYCHOLOGIST

KS25-3023	ANXIETY (Time -45 - 1Hrs.) COUNSELLING	1650	2060	2480
KS25-3024	BEHAVIOUR THERAPY (Each)	1820	1820	1820
KS25-3025	C.A.T. TEST	1820	1820	1820
KS25-3026	CHILD GUIDANCE & CARRER COUNSELLING OR CHILD PROBLEM	2250	2830	3400
KS25-3027	COUNSELLING MARITAL STRESS	2250	2830	3400
KS25-3028	DEADDICATION COUNSELLING	3080	3710	4440
KS25-3029	DEPRESSION (Time -45 - 1Hrs.) PSYCHOTHERAPY	2090	2610	3140
KS25-3030	I.Q.TEST	2100	2100	2100
KS25-3031	O.C.D. (Time -45 - 1Hrs.) THERAPY	2720	3400	4080
KS25-3032	PSYCHO SEXUAL THERAPY	2250	2830	3400
KS25-3033	PSYCHOMETRY TEST	11480	13770	16510
KS25-3034	PSYCHOSOMATIC DISORDER THERAPY	1960	2460	2950
KS25-3035	PSYCHOTHERAPY (FAMILY 40 MINUTE BY DOCTOR)	2430	3020	3610
KS25-3036	PSYCHOTHERAPY (INDIVIDUAL 40 MINUTES BY DOCTOR)	3320	4140	4970
KS25-3037	RAPE CASE (Time -45 - 1Hrs.)	1670	2090	2510
KS25-3038	RORSHACH PSYCHODIAGNOSTIC TEST	3890	3890	3890
KS25-3039	SHOCK DISORDER THERAPY	1310	1640	1970
KS25-3040	STRESS (Time -45 - 1Hrs.)	1670	2090	2510
KS25-3041	SUICIDAL TENDENCY (Time -45 - 1Hrs.) THERAPY	1870	2340	2800
KS25-3042	T.A.T. (PERSONALITY TEST)	2000	2000	2000

B. CHILD AND ADOLESCENT PSYCHIATRY

KS25-3043	ADHD TEST	2100	2100	2100
KS25-3044	AUTISM TEST	3150	3150	3150
KS25-3045	CHILD/ADOLESCENT BEHAVIOUR ANALYSIS WITH TREATMENT GUIDELINE PACKAGE (APPROXIMATE TIME 2-4 HRS.)	3420	3420	3420
KS25-3046	OCCUPATIONAL THERAPY ASSESSMENT (Paed.)	1100		
KS25-3047	OCCUPATIONAL THERAPY GROUP SESSION (Each Group of 4)	500		

Code	Description	Charges				
KS25-3048	OCCUPATIONAL THERAPY PACKAGE (12 Days)	8640				
KS25-3049	OCCUPATIONAL THERAPY SESSION (Paed.)	800				

*** I Q Test**
*** Behaviour analysis**
*** Neurocongnitive analysis (wherever applicable)**
*** Test for learning disabilities (wherever applicable)**
*** Diagnostic Summary**
*** Family Counselling**
*** Child / adolescent Counselling**
*** Treatment guideline**

KS25-3050	COUNSELLING (For 2 Sessions)	3000		3000		3000
KS25-3051	DEVELOPMENT SCREENING TEST	3000		3000		3000
KS25-3052	DIAGNOSTIC SCREENING & ASSESSMENT (All Sessions Included) TEST	5000		5000		5000
KS25-3053	FOLLOW UP/REPORT SHARING	1300		1300		1300
KS25-3054	INITIAL REGISTRATION COUNSELLING	1200		1200		1200
KS25-3055	INTERVENTION SESSIONS (For 2 Sessions) THERAPY	3000		3000		3000
KS25-3056	IQ ASSESSMENT (Above-6) TEST	4000		4000		4000
KS25-3057	IQ ASSESSMENT (Below-6) TEST	3500		3500		3500

C. DEADDICTION

KS25-3058	COUNSELLING BY COUNSELLOR SPECIALIZING IN ADDICTION PROBLEMS	570		570		570
KS25-3059	COUNSELLING BY COUNSELLOR SPECIALIZING IN ADDICTION PROBLEMS (DM)	1200		1500		1800
KS25-3060	COUNSELLING BY PSYCHIATRIST (15 Minutes)	1290		1620		1950

Code	Description	Charges
THE ASTHMA-ALLERGY CLINIC		
KS25-3061	ADDITIONAL SITTINGS FOR CONFIRMATION & FOR FOOD ALLERGY (ACTUAL COST OF SYRINGES EXTRA)	5470
KS25-3062	COMPLETE ALLERGY TEST - 2 SITTINGS OF 2 HRS. EACH (ACTUAL COST OF SYRINGES EXTRA) _ _ _	16860

Code	Description	IPD Charges Economy	Semi Private	Private
	MISCELLANEOUS PROCEDURES			
KS25-3063	INJECTION CHARGE (IV)	100	100	100
KS25-3064	ASCITIC TAP - DIAGNOSTIC	1430	1810	2160
KS25-3065	ASCITIC TAP - THERAPEUTIC	2040	2540	3030
KS25-3066	BLOOD TRANSFUSION CHARGES (PER UNIT)	810	810	810
KS25-3067	BONE BIOPSY	4490	5640	6730
KS25-3068	BONE MARROW ASPIRATION	2220	2760	3310
KS25-3069	CATHETERISATION	750	930	1130
KS25-3070	CONSULTATION PHYSIOTHERAPY	630		
KS25-3071	DRESSING - LARGE (OPD/CASUALTY/WARD) & Consumables charges extra	1020	1020	1020
KS25-3072	DRESSING - MEDIUM (OPD/CASUALTY/WARD)	630	630	630
KS25-3073	DRESSING - SMALL (OPD/CASUALTY/WARD)	340	340	340
KS25-3074	ENEMA	610	610	610
KS25-3075	FINGER STRAPPING	290	290	290
KS25-3076	FOLEYS CATHETR REMOVAL	210	210	210
KS25-3077	FOREIGN BODY REMOVAL	880	1100	1330
KS25-3078	GASTRIC LAVAGE	1660	2090	2510
KS25-3079	I/THECAL INJECTION	1980	2480	2970
KS25-3080	IMMUNOTHERAPY	5000	5000	5000
KS25-3081	INJECTION CHARGE	50	50	50
KS25-3082	INTRA ARTERIAL INJECTION	1360	1360	1360
KS25-3083	KIDNEY BIOPSY	5490	6850	8220
KS25-3084	LIVER ABSCESS ASPIRATON	4080	5100	6130
KS25-3085	MANUAL EVACUATION	200	200	200
KS25-3086	MEDICAL BOARD CHARGES	7870		
KS25-3087	NEBULIZER CHARGES (PER DAY)	1510	1510	1510
KS25-3088	NEBULIZER CHARGES PER SITTING	340	340	340
KS25-3089	NEOSTIGMINE TEST	3100	3860	4640
KS25-3090	PERICARDIAL TAPPING	7350	9190	11020
KS25-3091	PLASTER CAST REMOVAL	450	510	660
KS25-3092	PLEURAL TAP - DIAGNOSTIC	1440	1830	2170
KS25-3093	PLEURAL TAP - THERAPEUTIC	2400	3020	3610
KS25-3094	R-90 / PLAIN CATHERIZATION	200	200	200
KS25-3095	RYLE'S TUBE INSERTION	630	630	630
KS25-3096	STREPTO KINASE/THROMBOLYTIC THERAPY	3400	4210	5060
KS25-3097	SUPRA PUBIC CYSTOSTOMY (Sr. Resid.)	2020	2020	2020
KS25-3098	SUPRA PUBIC CYSTOSTOMY (Surgeon)	3370	3370	3370
KS25-3099	SUTURE REMOVAL	340	450	540

Code	Description	IPD Charges Economy	Semi Private	Private

PAIN CLINIC

HEAD AND NECK

KS25-3100	CERVICAL EPIDURAL CATHETERIZATION	15980	19990	23960
KS25-3101	CERVICAL EPIDURAL STEROID INJECTION	13320	16650	19990
KS25-3102	CERVICAL FACET BLOCK DIAGNOSTIC	5330	6690	8000
KS25-3103	CERVICAL FACET RF DENERVATION	18630	23290	27960
KS25-3104	DIAGNOSTIC MYOFASCIAL INJECTIONS	4630	5770	6960
KS25-3105	GLOSSOPHARYNGEAL NERVE BLOCK - DIAGNOSTIC	5330	6690	8000
KS25-3106	GLOSSOPHARYNGEAL NERVE BLOCK - NEUROLYTIC	8000	9980	11990
KS25-3107	GLOSSOPHARYNGEAL NERVE RFA RS.500/-	13320	16650	19990
KS25-3108	OCCIPITAL NERVE BLOCK DIAGNOSTIC	4630	5770	6960
KS25-3109	SPHENOPALATINE GANGLION BLOCK DIAGNOSTIC	6680	8320	9980
KS25-3110	SPHENOPALATINE GANGLION PRF	8720	10900	13090
KS25-3111	SPHENOPALATINE GANGLION RFA	18630	23290	27960
KS25-3112	STELLATE GANGLION BLOCK DIAGNOSTIC	5330	6690	8000
KS25-3113	STELLATE GANGLION PRF	8000	9980	11990
KS25-3114	STELLATE GANGLION RF	15980	19990	23960
KS25-3115	TRIGEMINAL GANGLION DIAGNOSTIC BLOCK	6680	8320	9980
KS25-3116	TRIGEMINAL GANGLION RFA	20340	25410	30500

THORAX

KS25-3117	INTERCOSTAL DIAGNOSTIC BLOCK	2670	3330	4010
KS25-3118	INTERCOSTAL NERVE PRF	5330	6690	8000
KS25-3119	INTERCOSTAL NERVE RF	8720	10900	13090
KS25-3120	PARASPINAL INJECTION	2670	3330	4010
KS25-3121	SPINAL CORD STIMULATOR IMPLANTATION	41270	51590	61920
KS25-3122	SPLANCHINIC NERVE NEUROLOYSIS	13320	16650	19990
KS25-3123	SPLANCHNIC NERVE BLOCK DIAGNOSTIC	5330	6690	8000
KS25-3124	SPLANCHNIC NERVE RFA	19950	24960	29940
KS25-3125	T2 T3 DIAGNOSITC BLOCK	5330	6690	8000
KS25-3126	T2 T3 RFA	18630	23290	27960
KS25-3127	THORACIC EPIDURAL INJECTIONS	5330	6690	8000
KS25-3128	THORACIC FACET BLOCK DIAGNOSTIC	5330	6690	8000
KS25-3129	THORACIS FACET RFA	10660	13320	15980
KS25-3130	TRANSFORAMINAL STEROID INJECTION	6680	8320	9980

LUMBAR

KS25-3131	BALLOON COMPRESSION OF TRIGEMINAL GANGLION	20000	25000	30000
KS25-3132	CELIAC PLEXUS BLOCK DIAGNOSTIC	6680	8320	9980
KS25-3133	CELIAC PLEXUS NEUROLYTIC BLOCK	15980	19990	23960
KS25-3134	DIAGNOSTIC NERVE ROOT BLOCK	5330	6690	8000
KS25-3135	INTRA THECAL PUMP IMPLANTATION	39940	49920	59890
KS25-3136	INTRADISCAL RFA	26620	33300	39930
KS25-3137	LUMBAR DISCOGRAPHY	8000	9980	11990
KS25-3138	LUMBAR EPIDURAL STEROID INJECTION	6680	8320	9980
KS25-3139	LUMBAR FACET JT INJECTION	8000	9980	11990

Code	Description	IPD Charges Economy	Semi Private	Private
KS25-3140	LUMBAR MEDIAL BRANCH BLOCK DIAGNOSTIC	5330	6690	8000
KS25-3141	LUMBAR MEDIAL BRANCH RFA	14530	18150	21800
KS25-3142	LUMBAR SYMPATHETIC NEUROLYTIC BLOCK	13320	16650	19990
KS25-3143	LUMBAR SYMPATHETIC PLEXUS DIAGNOSTIC BLOCK	6680	8320	9980
KS25-3144	LUMBAR SYMPATHETIC PLEXUS RFA	14530	18150	21800
KS25-3145	LUMBAR TRANSFORAMINAL STEROID INJECTION	7270	9090	10880
KS25-3146	OZONE DISCECTOMY	13320	16650	19990
KS25-3147	PERCUTANEOUS DISC DECOMPRESSION	31950	39940	47940
KS25-3148	PERCUTANEOUS NUCLEOTOMY	31950	39940	47940
KS25-3149	PRF TREATMENT OF DRG	8000	9980	11990
KS25-3150	SUPERIOR HYPOGASTRIC PLEXUS BLOCK DIAGNOSITC	5330	6690	8000
KS25-3151	SUPERIOR HYPOGASTRIC PLEXUS NEUROLYSIS	10660	13320	15980
CAUDAL				
KS25-3152	CAUDAL EPIDURAL STEROID	5330	6690	8000
KS25-3153	CAUDAL NEUROPLASTY	13320	16650	19990
KS25-3154	EPIDUROGRAM	8000	9980	11990
KS25-3155	GANGLIA IMPAR BLOCK DIAGNOSITC	4000	5000	5970
KS25-3156	GANGLIA IMPAR BLOCK NEUROLYTIC BLOCK	8000	9980	11990
KS25-3157	PRP SINGLE INTRA-ARTICULAR	12450	15560	18670
KS25-3158	S1 ROOT BLOCK	5330	6690	8000
KS25-3159	SI JOINT DIAGNOSTIC BLOCK	5330	6690	8000
KS25-3160	SI JOINT INTRA ARTICULAR STEROID INJECTION	6680	8320	9980
KS25-3161	SI JOINT RF DENERVATION	13320	16650	19990
OTHER				
KS25-3162	B/L ARTICULAR VISCOSE SUPPLEMENTATION	6960	8700	10430
KS25-3163	BONE MARROW ASPIRATION AND PERCUTANEOUS INFILTRATION - COMPLEX	70720		
KS25-3164	BONE MARROW ASPIRATION AND PERCUTANEOUS INFILTRATION - SIMPLE	56580		
KS25-3165	CAUDAL NEUROPLASTY (LEVEL-A)	16970	21220	25450
KS25-3166	CAUDAL NEUROPLASTY (LEVEL-B)	22630	28280	33960
KS25-3167	DESENSITIZATION THERAPY FOR FIBROMYALGIA	2670	3330	4010
KS25-3168	EPIDUROSCOPY	33960	42440	50920
KS25-3169	INTRA ARTICULAR INJECTION OF KNEE JOINT	2670	3330	4010
KS25-3170	INTRA ARTICULAR INJECTION OF SHOULDER JOINT	2670	3330	4010
KS25-3171	INTRA ARTICULAR PRF OF KNEE JOINT	5330	6690	8000
KS25-3172	INTRA-ARTICULAR PRP-BILATERAL JOINT	16970	21220	25450
KS25-3173	INTRA-ARTICULAR PRP-COMPLEX JOINT	22630	28280	33960
KS25-3174	INTRA-ARTICULAR PRP-UNILATERAL JOINT	11320	14130	16970
KS25-3175	INTRA-ARTICULAR VISCOSE SUPPLEMENTATION	4630	5770	6960
KS25-3176	MINIMALLY INVASIVE SPINE SURGERY (LEVE-A)	39610	49510	59400
KS25-3177	MINIMALLY INVASIVE SPINE SURGERY (LEVE-B)	56580	70720	84860
KS25-3178	MYOFASCIAL PRP THERAPY	11320	14130	16970
KS25-3179	NEUROMODULATION (LEVEL-A)	45260	56580	67890
KS25-3180	NEUROMODULATION (LEVEL-B)	56580	70720	84860
KS25-3181	ORTHO/PAIN BIOLOGICS-COMPLEX (BILATERAL)	63660		
KS25-3182	ORTHO/PAIN BIOLOGICS-COMPLEX (UNILATERAL)	42440		
KS25-3183	ORTHO/PAIN BIOLOGICS-SIMPLE (BILATERAL)	42440		

Code	Description	IPD Charges		
		Economy	Semi Private	Private
KS25-3184	ORTHO/PAIN BIOLOGICS-SIMPLE (UNILATERAL)	28280		
KS25-3185	PERCUTANEOUS RHIZOTOMY (LEVEL-A)	22630	28280	33960
KS25-3186	PERCUTANEOUS RHIZOTOMY (LEVEL-B)	28280	35350	42440
KS25-3187	PERCUTANEOUS SYMPATHECTOMY	33960	42440	50920
KS25-3188	PERIPHERAL NERVE RFA	11320	14130	16970
KS25-3189	PIRIFORMIS BOTOX INJECTION	5330	6690	8000
KS25-3190	PIRIFORMIS STEROID INJECTION	5330	6690	8000
KS25-3191	PLATELET RICH PLASMA REGENERATIVE THERAPY (LEVEL-A)	16970	21220	25450
KS25-3192	PLATELET RICH PLASMA REGENERATIVE THERAPY (LEVEL-B)	22630	28280	33960
KS25-3193	PROLOTHERAPY FOR KNEE	2670	3330	4010
KS25-3194	SUPRASCAPULAR NERVE BLOCK DIAGNOSTIC	2670	3330	4010
KS25-3195	SUPRASCAPULAR NERVE CONTIPLEX CATHETERIZATION	5330	6690	8000
KS25-3196	SUPRASCAPULAR NERVE PRF	5330	6690	8000
KS25-3197	THERAPEUTIC MYOFASCIAL INJECTION	6130	7640	9180
KS25-3198	TRANSFORAMINAL ENDOSCOPIC DISCECTOMY	51120	63890	76670
KS25-3199	TRANSFORAMINAL EPIDURAL BLOCK (LEVEL-A)	9050	11320	13570
KS25-3200	TRANSFORAMINAL EPIDURAL BLOCK (LEVEL-B)	11320	14130	16970
KS25-3201	TRANSFORMINAL NEUROPLASTY	12780	15980	19180
KS25-3202	TRIGGER POINT INJECTION	2670	3330	4010

Note : - RF/Ozone Generator Probe Charges to be extra

SURGICAL ONCOLOGY

Code	Description	IPD Charges Economy	Semi Private	Private
KS25-3203	ABDOMINO PERINEAL RESECTION (Surgical Onco)	44100	55130	66150
KS25-3204	ABSCESS DRAINAGE - INTRA-ABDOMINAL (Surgical Onco)	22500	25000	29000
KS25-3205	ABSCESS DRAINAGE - LARGE (Surgical Onco)	6500	8000	12000
KS25-3206	ADRENALECTOMY - SUBTOTAL (Surgical Onco)	50000	55000	60000
KS25-3207	ADRENALECTOMY - TOTAL (Surgical Onco)	47630	51030	54430
KS25-3208	ANTERIOR RESECTION - HIGH / ABDOMINOPERINEAL RESECTION (Surgical Onco)	50000	55000	60000
KS25-3209	ANTERIOR RESECTION - LOW (Surgical Onco)	55000	60000	65000
KS25-3210	ANTERIOR RESECTION (Surgical Onco)	44100	55130	66150
KS25-3211	BONE MARROW ASPIRATION (Surgical Onco)	6000	7000	8000
KS25-3212	BONE MARROW BIOPSY (Surgical Onco)	7000	9000	12000
KS25-3213	BREAST CONSERVATION SURGERY (Surgical Onco)	35000	40000	45000
KS25-3214	BREAST CONSERVATION SURGERY WITH IHC (Surgical Onco)	32700	40880	49050
KS25-3215	BREAST CONSERVATION SURGERY WITHOUT IHC (Surgical Onco)	35000	40000	45000
KS25-3216	BREAST LUMP - EXCISION BIOPSY - SMALL (Surgical Onco)	8000	11000	15000
KS25-3217	BREAST LUMP EXCISION BIOPSY - LARGE (Surgical Onco)	15000	18000	22000
KS25-3218	CHEMOPORT INSERTION (PERMANENT) (Surgical Onco)	15000	17000	22000
KS25-3219	CHEMOPORT REMOVAL (Surgical Onco)	8000	10000	12000
KS25-3220	COLECTOMY - RADICAL EXTENDED RIGHT / LEFT HEMI (Surgical Onco)	45000	48000	50000
KS25-3221	COLECTOMY - RADICAL TOTAL (Surgical Onco)	50000	55000	60000
KS25-3222	COLECTOMY - RIGHT HEM / LEFT HEMI / TRANSVERSE / SIGNOID - RADICAL (Surgical Onco)	40000	42000	46000
KS25-3223	COLOSTOMY - DIVERSION OR END (Surgical Onco)	25000	27000	30000
KS25-3224	COMPOSITE RESECTION FOR BUCCAL MUCOSA / GB SULCUS / FLOOR MOUTH / TONGUE WITH BI	66500	83130	99750
KS25-3225	COMPOSITE RESECTION FOR BUCCAL MUCOSA / GB SULCUS / FLOOR MOUTH/TONGUE WITH UNI	65000	68040	80000
KS25-3226	COMPOSITE RESECTION WITH LOCAL REGIONAL FLAP (Surgical Onco)	70000	87500	105000
KS25-3227	CYTOREDUCTIVE SURGERY (Surgical Onco)	70000	75000	85000
KS25-3228	DEBRIDEMENT - MEDIUM (Surgical Onco)	10000	12000	15000
KS25-3229	DEBRIDEMENT - MINOR (Surgical Onco)	7000	8000	10000
KS25-3230	DIAGNOSTIC LAPAROSCOPY (Surgical Onco)	25000	28000	32000
KS25-3231	DIAGNOSTIC LAPAROSCOPY WITH BIOPSY (Surgical Onco)	35000	38000	45000
KS25-3232	DIAGNOSTIC THORACOSCOPY AND BIOPSY (Surgical Onco)	45360	51030	56700
KS25-3233	DIRECT LARYNGOSCOPY (Surgical Onco)	4000	5000	6000
KS25-3234	DRESSING - LARGE (Surgical Onco)	2000	2500	3000
KS25-3235	DRESSING - MEDIUM (Surgical Onco)	2000	2500	3000
KS25-3236	DRESSING - SMALL (Surgical Onco)	1200	1500	1800
KS25-3237	ENDOMETRIAL BIOPSY (Surgical Onco)	5000	7000	8000
KS25-3238	ENDOSCOPIC ASSISTED RESECTION SURGERY LARGE (Surgical Onco)	58000	72500	87000
KS25-3239	ENDOSCOPIC ASSISTED RESECTION SURGERY SMALL (Surgical Onco)	40900	51130	61350
KS25-3240	ESOPHAGECTOMY - TOTAL - TRANS - HIATAL (Surgical Onco)	70000	75000	80000
KS25-3241	ESOPHAGECTOMY - TOTAL - TRANS-THORACIC (Surgical Onco)	75000	80000	85000
KS25-3242	EXCISION OF SUPERFICIAL LESION - LARGE (Surgical Onco)	9000	10000	12000
KS25-3243	EXCISION OF SUPERFICIAL LESION - SMALL (Surgical Onco)	6000	7000	8000
KS25-3244	EXCISION- SUPERFICIAL BENIGN TUMORS (Surgical Onco)	6000	7000	8000
KS25-3245	EXPLORATORY LAPAROTOMY ONLY (Surgical Onco)	25000	27000	30000
KS25-3246	EXPLORATORY LAPAROTOMY WITH ADHESIOLYSIS AND TRIAL DISSECTION FOR TUMOR REMOVAL	28350	30620	34020
KS25-3247	EXPLORATORY LAPAROTOMY WITH ADHESIOLYSIS FOR DENSE ADHESIONS / TRIAL DISSECTION F	28350	30620	34020
KS25-3248	EXTENDED NECK DISSECTION B/L (Surgical Onco)	45000	56250	67500

Code	Description	IPD Charges Economy	Semi Private	Private
KS25-3249	EXTENDED NECK DISSECTION U/L (Surgical Onco)	35000	43750	52500
KS25-3250	FEEDING GASTROSTOMY (Surgical Onco)	15000	18000	22000
KS25-3251	FEEDING JEJUNOSTOMY (Surgical Onco)	15000	18000	22000
KS25-3252	GASTRECTOMY - RADICAL PARTIAL (D2 DISSECTION) (Surgical Onco)	50000	55000	60000
KS25-3253	GASTRECTOMY - RADICAL TOTAL (D2 DISSECTION) (Surgical Onco)	56700	62370	68040
KS25-3254	GASTRECTOMY- RADICAL SUBTOTAL (D2) (Surgical Onco)	50000	55000	60000
KS25-3255	HEMIMANDIBULECTOMY (Surgical Onco)	50000	55000	60000
KS25-3256	HEMIPELVECTOMY (Surgical Onco)	70000	75000	85000
KS25-3257	HEPATICOJEJUNOSTOMY (Surgical Onco)	50000	55000	60000
KS25-3258	HICKMAN'S CATHETER INSERTION (Surgical Onco)	15000	17000	18000
KS25-3259	HIGH ORCHIDECTOMY (Surgical Onco)	20000	22000	25000
KS25-3260	HYPERTHERMIA INTRAPERITONEAL CHEMOTHERAPY (HIPEC) (Surgical Onco)	56700	62370	68040
KS25-3261	ICD PLACEMENT (Surgical Onco)	20000	22000	25000
KS25-3262	ILEAL CONDUIT (Surgical Onco)	53420	66780	80130
KS25-3263	ILEOSTOMY - DEVERSION OR END (Surgical Onco)	25000	30000	33000
KS25-3264	ILIO INGUNIAL LN DISSECTION U/L (Surgical Onco)	50000	55000	60000
KS25-3265	INFRA TEMPORAL FOSSA CLEARENCE (Surgical Onco)	55000	60000	65000
KS25-3266	INGUINAL LN DISSECTION - BILATERAL (Surgical Onco)	56000	58000	62000
KS25-3267	INGUINAL LYMPH NODE (Surgical Onco)	32000	40000	48000
KS25-3268	INTRA ORAL BIOPSY COMPLEX (Surgical Onco)	10000	12000	15000
KS25-3269	LAPAROSCOPY ASSISTED MALIGNANT TUMOR SURGERY (Surgical Onco)	75000	80000	87000
KS25-3270	LARYNGECTOMY - TOTAL WITH NECK DISSECTION (Surgical Onco)	70000	75000	80000
KS25-3271	LASER ARETYNOIDECTOMY/POSTERIOR CORDOTOMY (Surgical Onco)	25000	28000	32000
KS25-3272	LASER ENDOSCOPIC EXCISION FOR HYPORPHAPYNX CA (Surgical Onco)	20000	25000	30000
KS25-3273	LASER EXCISION OF LEUKOPLAKIA/ORAL CAVITY CANCER -SMALL (Surgical Onco)	20000	25000	30000
KS25-3274	LASER EXCISION OF ORAL CAVITY LARGE (Surgical Onco)	40000	47000	52000
KS25-3275	LASER EXCISION OF VOCAL NODULE/ POLYP/LEUKOPLAKIA (Surgical Onco)	17000	20000	22000
KS25-3276	LASER EXCISION SUPRAGLOTTIC (Surgical Onco)	50000	55000	60000
KS25-3277	LASER EXTENDED CORDECTOMY TYPE IV & V (Surgical Onco)	70000	75000	80000
KS25-3278	LASER FULGURATION /EXCISION TRACHEA (Surgical Onco)	25000	29000	35000
KS25-3279	LASER FULGURATION FOR RECURRENT LESIONS (Surgical Onco)	20000	25000	28000
KS25-3280	LASER FULGURATION RESPIRATORY PAPILLOMA (Surgical Onco)	20000	24000	28000
KS25-3281	LASER MICROLARYNGOSCOPY CORD STRIPPING, EXCISION CORDECTOMY TYPE I & II (Surgical Onc	17010	20410	24950
KS25-3282	LASER MICROLARYNGOSCOPY CORD STRIPPING, EXCISION CORDECTOMY TYPE III (Surgical Onco)	20410	22680	28350
KS25-3283	LASER ORAL CAVITY EXCISION MID SIZE LESION (Surgical Onco)	25000	30000	35000
KS25-3284	LASER SUBGLOTTIC TRACHEL STENOSIS (Surgical Onco)	30000	35000	40000
KS25-3285	LATISHINUS DORSI RECONSTRUCTION (Surgical Onco)	30000	35000	40000
KS25-3286	LIVER - TRISEGMENTECTOMY (Surgical Onco)	100000	110000	125000
KS25-3287	LIVER BIOPSY UNDER GA (Surgical Onco)	12000	15000	18000
KS25-3288	LIVER TUMOR - WIDE EXCISION - LARGE TUMOR / COMPLEX RESECTION (Surgical Onco)	60000	65000	70000
KS25-3289	LIVER TUMOR -WIDE EXCISION - SINGLE, SMALL /SIMPLE (Surgical Onco)	40000	45000	50000
KS25-3290	LIVER TUMORS - WIDE EXCISION - 2-4 IN NO. (Surgical Onco)	60000	65000	70000
KS25-3291	LN BIOPSY DEEP - NECK, AXILLA (Surgical Onco)	13000	15000	19000
KS25-3292	LN BIOPSY SUPERFICIAL -INGUINAL NECK (Surgical Onco)	7200	9000	10800
KS25-3293	LUNG METASECTOMY (Surgical Onco)	48540	60680	72810
KS25-3294	MARGINAL MANDIBULECTOMY WITH NECK DISSECTION (Surgical Onco)	65000	70000	75000
KS25-3295	MASTECTOMY (SIMPLE) (Surgical Onco)	35000	38000	42000
KS25-3296	MAXILLECTOMY - RADICAL (Surgical Onco)	56000	60000	65000

Code	Description	IPD Charges Economy	Semi Private	Private
KS25-3297	MEDIASTINAL TUMOR -EXCISION - SMALL / MEDIUM (Surgical Onco)	60000	65000	70000
KS25-3298	MODIFIED RADICAL MASTECTOMY (MRM)/BCS WITH IHC (Surgical Onco)	40000	45000	50000
KS25-3299	MODIFIED RADICAL MASTECTOMY (MRM)/BCS WITHOUT IHC (Surgical Onco)	43000	48000	50000
KS25-3300	MODIFIED RADICAL MASTECTOMY/BCS WITH IHC B/L (Surgical Onco)	48000	56000	60000
KS25-3301	NECK TUMOR - NECK TUMOR SMALL (Surgical Onco)	25000	28000	30000
KS25-3302	NECK TUMOR-NECK TUMOR LARGE (Surgical Onco)	50000	55000	60000
KS25-3303	NECK TUMOR-NECK TUMOR MEDIUM (Surgical Onco)	40000	45000	50000
KS25-3304	NEPHRECTOMY - RADICAL (Surgical Onco)	50000	55000	60000
KS25-3305	OESOPHAGECTOMY (Surgical Onco)	75000	80000	95000
KS25-3306	OMENTECTOMY (Surgical Onco)	20000	22000	25000
KS25-3307	ONCOPLASTY SURGERY LEVEL-1 (Surgical Onco)	18000	22500	27000
KS25-3308	ONCOPLASTY SURGERY LEVEL-2 (Surgical Onco)	30000	37500	45000
KS25-3309	OPEN BIOPSY (Surgical Onco)	6500	10000	15000
KS25-3310	ORCHIDECTOMY - BILATERAL (Surgical Onco)	20000	25000	28000
KS25-3311	ORCHIDECTOMY- U/L (Surgical Onco)	15000	18000	22000
KS25-3312	PANCREATECTOMY - PARTIAL (Surgical Onco)	50000	55000	60000
KS25-3313	PANCRETECTOMY - TOTAL (Surgical Onco)	100000	105000	120000
KS25-3314	PARAPHARYNGEAL TUMOR EXCISION (Surgical Onco)	35000	42000	52000
KS25-3315	PARATHYROIDECTOMY (Surgical Onco)	35000	37000	40000
KS25-3316	PAROTIDECTOMY WITH NECK DISSECTION (Surgical Onco)	56000	65000	80000
KS25-3317	PARTIAL AMPUTATION OF PENIS WITH BILATERAL BLOCK DISSECTION (Surgical Onco)	60000	65000	70000
KS25-3318	PARTIAL CYSTECTOMY (Surgical Onco)	28200	35250	42300
KS25-3319	PARTIAL GASTRECTOMY - PALLIATIVE OR OTHERWISE (Surgical Onco)	40000	45000	50000
KS25-3320	PARTIAL GLOSSECTOMY WITH NECK DISSECTION (Surgical Onco)	55000	60000	65000
KS25-3321	PARTIAL MAXILLECTOMY (Surgical Onco)	30000	35000	40000
KS25-3322	PARTIAL NEPHRECTOMY (Surgical Onco)	51300	64130	76950
KS25-3323	PELVIC / AXILLARY LN DISECTION-UNILATERAL (Surgical Onco)	25000	30000	35000
KS25-3324	PELVIC / AXILLARY LN DISSECTION - BILATERAL (Surgical Onco)	30000	35000	40000
KS25-3325	PLEURAL TAPPING - DIAGNOSTIC (Surgical Onco)	5000	7000	9000
KS25-3326	PLEURAL TAPPING - THERAPEUTIC (Surgical Onco)	9000	11000	12000
KS25-3327	PNEUMONECTOMY / LOBECTOMY (Surgical Onco)	60000	70000	80000
KS25-3328	PROCTOSCOPY (Surgical Onco)	2000	2500	3000
KS25-3329	PROCTOSCOPY WITH BIOPSY (Surgical Onco)	6000	8000	10000
KS25-3330	RADICAL / MODIFIED NECK DISSECTION (UNILATERAL) (Surgical Onco)	34850	43560	52280
KS25-3331	RADICAL / MODIFIED RADICAL MASTECTOMY (Surgical Onco)	35000	40000	45000
KS25-3332	RADICAL CHOLECYSTECTOMY (Surgical Onco)	60000	65000	70000
KS25-3333	RADICAL CYSTECTOMY (Surgical Onco)	63670	79590	95510
KS25-3334	RADICAL MAXILLECTOMY (EXTENDED) (Surgical Onco)	52230	65290	78350
KS25-3335	RADICAL PANCREATO-DUODENECTOMY (Surgical Onco)	85000	90000	100000
KS25-3336	RADICAL/MODIFIED NECK DISSECTION (BILATERAL) (Surgical Onco)	50000	55000	60000
KS25-3337	REDICAL HYSTERECTOMY TYPE I & II (Surgical Onco)	60000	65000	70000
KS25-3338	REDICAL HYSTERECTOMY TYPE III (Surgical Onco)	62000	68000	75000
KS25-3339	RE-EXPLORATION OF NECK FOR CHYLE LEAK / BLEEDING (ONCO (Surgical Onco)	20000	25000	28000
KS25-3340	RESECTION AND ANASTOMOSIS FOR SMALL BOWEL TUMOR (Surgical Onco)	35000	40000	45000
KS25-3341	RETROPERITONEAL LYMPH NODE DISSECTION (Surgical Onco)	60000	65000	70000
KS25-3342	RETROPERITONEAL TUMOR EXCISION - LARGE (Surgical Onco)	60000	65000	70000
KS25-3343	RETROPERITONEAL TUMOR EXCISION-MEDIUM (Surgical Onco)	45000	50000	55000
KS25-3344	SECONDARY CLOSURE OF WOUND (SMALL) (Surgical Onco)	6000	8000	10000

Code	Description	IPD Charges		
		Economy	Semi Private	Private
KS25-3345	SECONDARY SUTURING - LARGE (Surgical Onco)	15000	20000	25000
KS25-3346	SECONDARY SUTURING - SMALL (Surgical Onco)	10000	12000	15000
KS25-3347	SENTINEL LYMPH NODE BIOPSY (Surgical Onco)	15000	20000	25000
KS25-3348	SIMPLE MASTECTOMY - LARGE TUMOR (Surgical Onco)	30000	35000	40000
KS25-3349	SKELETAL RECONSTRUCTION (Surgical Onco)	90000	98000	105000
KS25-3350	SOFT TISSUE TUMOR EXCISION (CENTRAL) - LARGE / COMPARTMENT EXCISION FOR PERIPHERAL S	55000	60000	65000
KS25-3351	SOFT TISSUE TUMOR EXCISION (CENTRAL) - MEDIUM (Surgical Onco)	50000	55000	60000
KS25-3352	SOFT TISSUE TUMOR EXCISION (PERIPHERAL) - LARGE / CENTRAL - MEDIUM (Surgical Onco)	38000	40000	45000
KS25-3353	SOFT TISSUE TUMOR EXCISION (PERIPHERAL) - MEDIUM (Surgical Onco)	30000	35000	40000
KS25-3354	SOFT TISSUE TUMOR EXCISON (PERIPHERAL) - SMALL (Surgical Onco)	25000	28000	30000
KS25-3355	SUBMANDIBULAR GLAND EXCISION FOR TUMOR (Surgical Onco)	25000	27000	30000
KS25-3356	SUBTOTAL GLOSSECTOMY (Surgical Onco)	56000	70000	84000
KS25-3357	SUPERFICIAL PAROTIDECTOMY (Surgical Onco)	40000	45000	50000
KS25-3358	SUPERFICIAL TUMOR EXCISION - LARGE (Surgical Onco)	15000	20000	25000
KS25-3359	SUPERFICIAL TUMOR EXCISION FACE MEDIUM/LARGE (Surgical Onco)	25000	28000	30000
KS25-3360	SUPERFICIAL TUMOR EXCISION FACE SMALL (Surgical Onco)	20000	22000	25000
KS25-3361	SUPERFICIAL TUMOR OR MULTIPLE TUMOR - LARGE - WIDE EXCISION (Surgical Onco)	15000	18000	22000
KS25-3362	SUPERFICIAL TUMOR WIDE EXCISION - SMALL (Surgical Onco)	7000	9000	12000
KS25-3363	SUPRA OMMOHOID NECK DISECTION U/L (Surgical Onco)	25000	31250	37500
KS25-3364	SUPRAOMOHYOID DISSECTION - BILATERAL (Surgical Onco)	40000	45000	50000
KS25-3365	SUTURING - SINGLE STITCH (Surgical Onco)	3000	4000	5000
KS25-3366	TAH + BSO + PELVIC LN DISSECTION (Surgical Onco)	51030	56700	62370
KS25-3367	TAH + BSO + PELVIC LN DISSECTION + OMENTECTOMY (Surgical Onco)	70000	75000	80000
KS25-3368	TAH + BSO + PELVIC LN DISSECTION + OMENTECTOMY + PARA-AORTIC LN SAMPLING + PERITONEA	75000	80000	85000
KS25-3369	TAH + BSO + PELVIC LN DISSECTION + PERITONEAL WASHING (Surgical Onco)	60000	65000	70000
KS25-3370	TAH+BSO (Surgical Onco)	37000	40000	45000
KS25-3371	THORACOTOMY (Surgical Onco)	37000	40000	45000
KS25-3372	THYROID LOBECTOMY/HEMITHYROIDECTOMY (Surgical Onco)	35000	40000	45000
KS25-3373	THYROIDECTOMY - TOTAL / COMPLETION THYROIDECTOMY (Surgical Onco)	42000	46000	52000
KS25-3374	THYROIDECTOMY -SUB TOTAL (Surgical Onco)	35000	40000	45000
KS25-3375	THYROIDECTOMY WITH NECK DISSECTION II-IV + VI/ MND/ RND (Surgical Onco)	60000	65000	70000
KS25-3376	THYROIDECTOMY WITH NECK DISSECTION LEVEL II-IV (Surgical Onco)	55000	60000	65000
KS25-3377	TOTAL GLOSSECTOMY WITH NECK DISSECTION (Surgical Onco)	70000	85000	105000
KS25-3378	TOTAL PAROTIDECTOMY (NERVE PRESERVING) (Surgical Onco)	50000	55000	60000
KS25-3379	TOTAL THYOIRDECTMY AND COMPARTMENT NECK DISECTION B/L (Surgical Onco)	80960	101200	121440
KS25-3380	TOTAL THYROIDECTOMY AND COMPARTMENT NECK DISECTION U/L (Surgical Onco)	68320	85400	102480
KS25-3381	TRACHEL RESECTION AND ANASTOMOSIS (Surgical Onco)	35000	43750	52500
KS25-3382	VAC DRESSING LARGE(Surgical Onco)	10500	13130	15750
KS25-3383	VAC DRESSING MEDIUM (Surgical Onco)	7500	9380	11250
KS25-3384	VAC DRESSING SMALL (Surgical Onco)	5000	6250	7500
KS25-3385	WEDGE BIOPSY - SUPERFICIAL (Surgical Onco)	3000	4000	6000
KS25-3386	WIDE EXCISION OF LARGE TUMOURS/MULTIPLE TUMOURS (Surgical Onco)	20120	25150	30180
KS25-3387	WIDE LOCAL EXCISION SMALL (Surgical Onco)	24720	30900	37080
KS25-3388	WIDE LUMPECTOMY BREAST LARGE (Surgical Onco)	20000	25000	28000

Code	Description	IPD Charges Economy	Semi Private	Private
	HEMAT & BONE MARROW			
KS25-3389	BMT-ALLOGENEIC-RELATED	1272590	1590730	1908880
KS25-3390	BMT-ALLOGENEIC-UNRELATED	3085060	3856320	4627580
KS25-3391	BMT-AUTOLOGOUS-I	809830	1012280	1214740
KS25-3392	BMT-AUTOLOGOUS-II	964080	1205100	1446120
KS25-3393	BMT-HAPLOIDENTICAL	2313790	2892240	3470690
KS25-3394	BMT-MULTIPLE MYLOMA	578450	723060	867670

Note : - This package includes hospital stay of approx. 3-4 weeks.

RADIATION ONCOLOGY

Code	Description	Charges
KS25-3395	2D PLANNING ON LINEAR ACCELERATOR	7510
KS25-3396	3D CRT WITH IMAGE GUIDANCE	134670
KS25-3397	3D PLANNING ON LINEAR ACCELERATOR	10770
KS25-3398	BRACHYTHERAPY (SIMPLE)	14380
KS25-3399	BRACHYTHERAPY CATHETER(EACH CATHETER)	1320
KS25-3400	BTx IMPLANT HEAD & NECK: BASE OF TONGUE	11380
KS25-3401	BTx IMPLANT (APPLICATION/INSERTION) :VAGINAL CYLIN	1730
KS25-3402	BTx IMPLANT (APPLICATION/INSERTION): ENDOANAL	1730
KS25-3403	BTx IMPLANT (APPLICATION/INSERTION): HEAD & NECK:L	4650
KS25-3404	BTx IMPLANT (APPLICATION/INSERTION): HEAD & NECK:T	13730
KS25-3405	BTx IMPLANT (APPLICATION/INSERTION):BRAIN IMPLANT	22760
KS25-3406	BTx IMPLANT (APPLICATION/INSERTION):HEAD & NECK: C	6900
KS25-3407	BTx IMPLANT (APPLICATION/INSERTION):HEAD & NECK:AN	9080
KS25-3408	BTx IMPLANT (APPLICATION/INSERTION):ICRT (3 CHANNE	2920
KS25-3409	BTx IMPLANT (APPLICATION/INSERTION):NASOPHARYNGEAL	1730
KS25-3410	BTx IMPLANT (APPLICATION/INSERTION):PARACERVICAL I	11380
KS25-3411	BTx IMPLANT (APPLICATION/INSERTION):PERINEAL(PROST	11380
KS25-3412	BTx IMPLANT (APPLICATION/INSERTION):SOFT TISSUE SA	9080
KS25-3413	BTx IMPLANT GOLD SEED/RADIOOPAQUE MARKER PLACEMENT	2350
KS25-3414	BTx PLANNING & DELIVERY:3D BRACHYTHERAPY	17150
KS25-3415	BTx PLANNING & DELIVERY:INTERSTITIAL IMPLANTS	14290
KS25-3416	BTx PLANNING & DELIVERY:SURFACE MOULDS	13060
KS25-3417	CT MRI CT PET PLANNING	13320
KS25-3418	EXTERNAL BEAM RT-BLOOD PRODUCT IRRAD (PER UNIT): E	2350
KS25-3419	EXTERNAL BEAM RT-HEMIBODY IRRADIATION(U/L)MULTIPLE	22760
KS25-3420	EXTERNAL BEAM RT-HEMIBODY IRRADIATION(UPPER /LOWER	11380
KS25-3421	EXTERNAL BEAM RT-RADICAL ELECTRON BEAM THERAPY/ELE	99360
KS25-3422	EXTERNAL BEAM RT-RESPIRATORY GATED IGRT	250920
KS25-3423	EXTERNAL BEAM RT-SINGLE FRACTION (6-8 GY) ONE SITE	5770
KS25-3424	EXTERNAL BEAM RT-SINGLE FRACTION (EVERY ADDITIONAL	4650
KS25-3425	EXTERNAL BEAM RT-STEROTACTIC RADIOSURGERY	223000
KS25-3426	EXTERNAL BEAM RT-TOTAL SKIN ELECTRONS(RADICAL)	99360
KS25-3427	EXTERNAL BEAM RT-UPTO FIVE FRACTION(PREOP/PALLATIV	17150
KS25-3428	GLADIAL WAFER BRACHYTHERAPY	120220
KS25-3429	IGRT BOOST/SHORT COURSE	133800
KS25-3430	INTENSITY MODULATED RADIOTHERAPY (IMRT) BOOST/SHOR	83680
KS25-3431	INTERSTITIAL BRACHYTHERAPY(MULTIPLE FRACTIONS)	120330
KS25-3432	INTRACAVITORY BRACHYTHERAPY(GYNAECOLOGICAL)	27100
KS25-3433	INTRALUMINAL BRACHYTHERAPY(NON-GYNAECOLOGICAL)	16220
KS25-3434	MOULD ROOM CHARGES: CONE BEAM CT	3420
KS25-3435	MOULD ROOM CHARGES:ELECTRON BLOCK	2350
KS25-3436	MOULD ROOM CHARGES:PORTAL IMAGING	810
KS25-3437	MOULD ROOM CHARGES-VAC LOC	5770
KS25-3438	PLANNING CHARGES FOR 3D CONFORMAL (RADICAL)	33780
KS25-3439	RADICAL THERAPY ON LINEAR ACCELERATOR	106090
KS25-3440	RT001 IMRT	189220

Code	Description	Charges
KS25-3441	RT002 IGRT	263720
KS25-3442	RT003 RAPID ARC IMRT	206420
KS25-3443	RT004 RAPID ARC IGRT	298120
KS25-3444	RT005 IMRT WITH 4D GATING	326790
KS25-3445	RT006 STEREOTACTIC BODY RT(SBRT)	326790
KS25-3446	RT008 STEREOTACTIC RADIOTHEARPY (SRT)	166260
KS25-3447	RT009 3D CONFORMAL RADIOTHERAPY	114670
KS25-3448	RT009B STEREOTACTIC RADIOSURGERY (SRS) FRAMELESS F	178600
KS25-3449	RT009C STEREOTACTIC RADIOSURGERY (SRS) FRAMELESS S	219430
KS25-3450	RT010 RADICAL RADIOTHERAPY	92320
KS25-3451	RT011 ADJUVANT RADIOTHEARAPY	80270
KS25-3452	RT012 PALLIATIVE RADIOTHEARAPY SINGLE SITE	56700
KS25-3453	RT013 PALLIATIVE RADIOTHEARAPY MULTIPLE SITE	56700
KS25-3454	RT014 EXTENDED FIELD RADIOTHERAPY	114670
KS25-3455	RT016 ELECTRON BOOST	28680
KS25-3456	RT017 BLOOD IRRADIATION PER UNIT	1120
KS25-3457	RT018 INTRACAVITY BRACHYTHERAPY	21230
KS25-3458	RT019 INTRALUMINAL BRACHYTHERAPY	16220
KS25-3459	RT022 INTERSTITIAL BRACHYTHERAPY RADICAL	78900
KS25-3460	RT023 INTERSTITIAL BRACHYTHERAPY BOOST	39500
KS25-3461	RT024 INTRAOPERATIVE BRACHYTHERAPY	38320
KS25-3462	RT025 INTRACAVITY WITH IMPLANT	26840
KS25-3463	RT026 MOULD/ CAST/ IMMOBILIZATION (IN ALL CASES)	6900
KS25-3464	RT027 PLANNING CT IN ALL CASES	6900
KS25-3465	RT028 CUSTOMISED SHIELDING BLOCK (IF USED)	13320
KS25-3466	RT029 VACLOC (IF USED)	2100
KS25-3467	RT030 CONVENTIONAL TPS PLANNING	13320
KS25-3468	RT031 3D CRT TPS PLANNING	20110
KS25-3469	RT032 IMRT TPS PLANNING	27000
KS25-3470	RT033 IGRT TPS PLANNING	32720
KS25-3471	RT034 RAPID ARC IMRT TPS PLANNING	39600
KS25-3472	RT035 RAPID ARC IGRT TPS PLANNING	46490
KS25-3473	RT036 SRT (CRANIUM) TPS PLANNING	27000
KS25-3474	RT037 SRT (BODY) TPS PLANNING	46490
KS25-3475	RT038 4D GATING TPS PLANNING	46490
KS25-3476	RT039 CT RESPIRATORY GATING TPS PLANNING	46490
KS25-3477	RT040 CONVENTIONAL PER FRACTION	2450
KS25-3478	RT041 3D CRT PER FRACTION	2920
KS25-3479	RT042 IMRT PER FRACTION	4140
KS25-3480	RT043 IGRT PER FRACTION	6120
KS25-3481	RT044 RAPID ARC IMRT PER FRACTION	5300
KS25-3482	RT045 RAPID ARC IGRT PER FRACTION	8020
KS25-3483	RT046 SRT (CRANIUM) PER FRACTION	4140
KS25-3484	RT047 SRT (BODY) PER FRACTION	8020
KS25-3485	RT048 4D GATING PER FRACTION	8020
KS25-3486	RT058 RADIATION COURSE CONSULTATION	9800
KS25-3487	RT061 IG – SRT	246570
KS25-3488	RT-86 RESPIRATORY GATING WITH LINEAR ACCELERATOR P	160740

Code	Description	Charges
KS25-3489	RTP 2D/3D	6900
KS25-3490	THERMOPLASTIC MASK:HEAD	1730
KS25-3491	THERMOPLASTIC MASK:HEAD AND NECK(THORACIC ABDOMIN	2920
KS25-3492	UPTO FIVE FRACTION(EACH ADDITIONAL SITE, SERIAL TR	13730

Code	Description	IPD Charges Economy	Semi Private	Private
	ROBOTIC SURGERIES			
KS25-3493	ROBOTIC ADRENALECTOMY	56680	70840	85020
KS25-3494	ROBOTIC ASST. INGUNAL LND	68600	85740	102900
KS25-3495	ROBOTIC ASST. RADICAL NEPHRECTOMY	68600	85740	102900
KS25-3496	ROBOTIC ASST. SIMPLE NEPHRECTOMY	58760	73450	88150
KS25-3497	ROBOTIC B/L THR	92630	115790	138910
KS25-3498	ROBOTIC B/L TKR	92630	115790	138910
KS25-3499	ROBOTIC CERVICAL SYMPHATECTOMY	49000	61270	73510
KS25-3500	ROBOTIC CHARGES - BILATERAL (TKR /THR)	80000	80000	80000
KS25-3501	ROBOTIC CHARGES - UNILATERAL (TKR /THR)	50000	50000	50000
KS25-3502	ROBOTIC CHEST WALL SURGERY FOR TUMOURS AND DEFORMITIES	49000	61270	73510
KS25-3503	ROBOTIC DIAPHRAGMATIC HERNIA REPAIR (COMPLEX)	68600	85740	102900
KS25-3504	ROBOTIC DIAPHRAGMATIC HERNIA REPAIR (SIMPLE)	53930	67410	80890
KS25-3505	ROBOTIC ENUCLEATION OF ESOPHAGEAL LEIOMYOMA (COMPLEX)	58760	73450	88150
KS25-3506	ROBOTIC ENUCLEATION OF ESOPHAGEAL LEIOMYOMA (SIMPLE)	39180	48960	58760
KS25-3507	ROBOTIC ENUCLEATION OF HAMARTOMA	28510	35640	42760
KS25-3508	ROBOTIC EXCISION - INVASIVE AMM-LUNG- PERICARDIUM	83940	104920	125890
KS25-3509	ROBOTIC EXCISION OF ANTERIOR MEDIASTINAL TUMOUR (COMPLEX)	78340	97930	117530
KS25-3510	ROBOTIC EXCISION OF ANTERIOR MEDIASTINAL TUMOUR (SIMPLE)	53930	67410	80890
KS25-3511	ROBOTIC EXCISION OF MEDIASTINAL CYSTS	53930	67410	80890
KS25-3512	ROBOTIC EXCISION OF MEDIASTINAL TUMOURS	53930	67410	80890
KS25-3513	ROBOTIC EXCISION-INVASIVE AMM WITH LUNG RESECTION	83940	104920	125890
KS25-3514	ROBOTIC EXCISION-INVASIVE AMM WITH PERICARDIAL RESECTION	78340	97930	117530
KS25-3515	ROBOTIC EXCISION-INVASIVE AMM-PERICARDIUM-LUNG-VASCULAR	94100	117620	141150
KS25-3516	ROBOTIC KIDNEY TRANSPLANT WITH GELPORT	158190	197750	237290
KS25-3517	ROBOTIC KIDNEY TRANSPLANT WITHOUT GELPORT	149360	186700	224040
KS25-3518	ROBOTIC LIGATION OF THORACIC DUCT FOR CHYLOTHORAX	44090	55110	66140
KS25-3519	ROBOTIC LOBECTOMY	53930	67410	80890
KS25-3520	ROBOTIC LUNG METASTATECTOMY	28510	35640	42760
KS25-3521	ROBOTIC MEDIASTINAL LN SAMPLING - CHEST	39180	48960	58760
KS25-3522	ROBOTIC PARATHYROID EXCISION	53930	67410	80890
KS25-3523	ROBOTIC PARTIAL NEPHRECTOMY	68600	85740	102900
KS25-3524	ROBOTIC PLICATION OF DIAPHRAGM	44080	55100	66130
KS25-3525	ROBOTIC PLICATION OF DIAPHRAGM WITHOUT MESH PLACEMENT (COMPLEX)	78340	97930	117530
KS25-3526	ROBOTIC PLICATION OF DIAPHRAGM WITHOUT MESH PLACEMENT (SIMPLE)	53930	67410	80890
KS25-3527	ROBOTIC PNUMONECTOMY	53930	67410	80890
KS25-3528	ROBOTIC POSTERIOR MEDIASTINAL TUMOR EXCISION (COMPLEX)	78340	97930	117530
KS25-3529	ROBOTIC POSTERIOR MEDIASTINAL TUMOR EXCISION (SIMPLE)	53930	67410	80890
KS25-3530	ROBOTIC RADICAL HYSTERECTOMY	56680	70840	85020
KS25-3531	ROBOTIC RADICAL NEPHROURETERECTOMY	87370	109220	131060
KS25-3532	ROBOTIC RADICAL PROSTATECTOMY	60500	75640	90770
KS25-3533	ROBOTIC RADICAL THYMECTOMY FOR MG/NON-INVASIVE THYMOMA	68600	85740	102900
KS25-3534	ROBOTIC RALP (ROBOTIC ASST. LAP PYLOPLAST)	58760	73450	88150
KS25-3535	ROBOTIC RESECTION OF THORACIC OUTLET TUMOURS	53930	67410	80890
KS25-3536	ROBOTIC RETROPERITONEAL LYMPH NODE DISSECTION	87370	109220	131060
KS25-3537	ROBOTIC SEGMENTECTOMY	53930	67410	80890
KS25-3538	ROBOTIC THYMECTOMY	53930	67410	80890

Code	Description	IPD Charges		
		Economy	Semi Private	Private
KS25-3539	ROBOTIC THYMECTOMY FOR SMALL THYMOMA	53930	67410	80890
KS25-3540	ROBOTIC U/L THR	52930	66170	79380
KS25-3541	ROBOTIC U/L TKR	52930	66170	79380
KS25-3542	ROBOTIC URETEROCALICOSTOMY	68600	85740	102900
KS25-3543	ROBOTIC URETEROLYSIS B/L	94100	117620	141150
KS25-3544	ROBOTIC URETEROLYSIS U/L	68600	85740	102900
KS25-3545	ROBOTIC VESICLE DIVERTI CULECTOMY	58760	73450	88150
KS25-3546	ROBOTIC VIDEOENDOSCOPIC INGUINAL LYMPHANECTOMY (VEIL)	56680	70840	85020

Code	Description	Charges

TRANSFUSION MEDICINE (BLOOD BANK)

BLOOD CENTER - PROCESSING CHARGES

KS25-3547	APHERESIS DONOR SCREENING - TTI (RAPID TEST - ECI, HIV, HCV, HBsAg, MALARIA, SYPHILIS _ _ _	1700
KS25-3548	BLOOD FOR EXCHANGE TRANSFUSION (Mandatory Replacement Donor - 1 Donor for 1 unit)	3500
KS25-3549	BLOOD FOR EXCHANGE TRANSFUSION (Mandatory Replacement Donor - 1 Donor for 1 unit) NAT Tested	5050
KS25-3550	BLOOD GROUPING - APHERESIS DONOR _ _ _

Code	Description	Charges
KS25-3589	SCD (Sterile Connecting Device) Wafer	150
KS25-3590	SDP (SINGLE DONOR PLATELETS) (Mandatory Donor of Same Group)	11000
KS25-3591	SDP (SINGLE DONOR PLATELETS)(Mandatory Donor of Same Group) NAT Tested	12200
KS25-3592	SINGLE BAG CHARGE	200
KS25-3593	SINGLE DONOR CONVALESCENT PLASMA (PLASMA APHERESIS)	11000
KS25-3594	THERAPEUTIC APHERESIS (Plasma, Platelet & Other Components) without Replaement fluid	19000
KS25-3595	THERAPEUTIC PHLEBOTOMY	1000
KS25-3596	TRANSFER BAG	200
KS25-3597	WASHED PRBC (Mandatory Replacement Donor - 1 Donor for 1 unit)	2750
KS25-3598	WASHED PRBC (Mandatory Replacement Donor - 1 Donor for 1 unit) NAT Tested	4100
KS25-3599	WHOLE BLOOD (Mandatory Replacement Donor - 1 Donor for 1 unit)	2350
KS25-3600	WHOLE BLOOD (Mandatory Replacement Donor - 1 Donor for 1 unit) NAT Tested	3550

BLOOD IS PROVIDED AGAINST VOLUNTARY/REPLACEMENT DONATION.

NOTE : All mandatory blood tests are conducted:
*** HIV 1 & 2 (IV Generation)**
*** Hepatitis B Surface Ag (HbsAg) (IV Generation)**
*** Hepatitis C Virus (HCV)**
*** VDRL**
*** Malaria Parasite**
Extra tests are also conducted which are not mandatory as per Guidelines from Drug Controller India but are important:
*** Hepatitis B Core Antibody (Anti HBc IgM)**
*** Test for unexpected antibody.**
*** Cross matching by Gel Card technology (BioRad).**
*** Ab Screening**
*** Quadriple Blood Bags**
*** ECI**
*** NAT (Nucleic Acid Test)**

CODE	DESCRIPTION	CHARGES

AMBULANCE CHARGES

KS25-3601	AMBULANCE/ TRANSPORTATION CHARGES (0-3 Km. Bothway)	170
KS25-3602	AMBULANCE/ TRANSPORTATION CHARGES (03-5 Km.)	270
KS25-3603	AMBULANCE/ TRANSPORTATION CHARGES (05-10 Km.)	550
KS25-3604	AMBULANCE/ TRANSPORTATION CHARGES (10-15 Km.)	830
KS25-3605	AMBULANCE/ TRANSPORTATION CHARGES (15-20 Km.)	1100
KS25-3606	AMBULANCE/ TRANSPORTATION CHARGES (20-25 Km.)	1380
KS25-3607	AMBULANCE/ TRANSPORTATION CHARGES (25-30 Km.)	1650
KS25-3608	AMBULANCE/ TRANSPORTATION CHARGES (30-35 Km.)	1930
KS25-3609	AMBULANCE/ TRANSPORTATION CHARGES (35-40 Km.)	2200
KS25-3610	AMBULANCE/ TRANSPORTATION CHARGES (40-45 Km.)	2480
KS25-3611	AMBULANCE/ TRANSPORTATION CHARGES (45-50 Km.)	2750
KS25-3612	AMBULANCE/ TRANSPORTATION CHARGES (50-60 Km.)	3310
KS25-3613	AMBULANCE/ TRANSPORTATION CHARGES (60-70 Km.)	3850
KS25-3614	AMBULANCE/ TRANSPORTATION CHARGES (70-80 Km.)	4410

FACILITIES WITH AMBULANCE AT ADDITIONAL CHARGES

KS25-3615	DOCTORS (NOIDA & WITHIN DELHI) - D.M./M.Ch.	3850
KS25-3616	DOCTORS (NOIDA & WITHIN DELHI) - M.B.B.S.	2200
KS25-3617	DOCTORS (NOIDA & WITHIN DELHI) - M.D.	3310
KS25-3618	MEDICAL ASSISTANT IN AMBULANCE (WITHIN DELHI)	1380
KS25-3619	MEDICAL ASSISTANT IN AMBULANCE (WITHIN NOIDA)	610
KS25-3620	MONITORING CHARGES DURING TRANSPORT / AMBULANCE (CONTINUED ECG & PULSE OXIMETER)	1650
KS25-3621	VENTILATOR CHARGES DURING TRANSPORT / AMBULANCE (INCLUDING OXYGEN CHARGES)	2750

Note :

1. **For Places not specifically covered above (per KM - bothways) Rs.61/-**
2. **Mobile ICU (per KM bothway) Rs.83/-**
3. **Heart Ambulance (per KM bothways) Rs.88/-**
4. **MBBS Outside Delhi (per KM bothway) Rs.20/- (Addition to KS25-3616)**
5. **MD Outside Delhi (per KM bothway) Rs.25/-(Addition to KS25-3617)**
6. **DM/M.Ch Outside Delhi(per KM bothway) Rs.30/-(Addition to KS25-3615)**
7. **Medical Assistant Outside Delhi (per KM bothway) Rs.20/- (Addition to KS25-3618)**

GENERAL GUIDELINES

1. In case of two different procedures done simultaneously, full charges for the major operation and 50% Charges for 2nd Operation will be charged provided the incision is the same. In case separate incisions are used, full charges for one side and 75% charges for the other side will be charged.

2. For Re-exploratory surgery at different sittings, the operation charges will not exceed 50% of that procedure.

3. If more than one Surgeon performs two different procedures at the same time, they shall be entitled to charge their separate fees in respect of procedures performed.

4. When a patient is admitted to ICU /ICCU/ Day Care bed directly, the charges for procedures/surgeries will be in line with rates applicable for semi-private ward if not listed separately.

5. In case Surgeon feels that, in the best interest of the patient, he requires the presence of another colleague in same speciality or another speciality or sub-speciality, the two together are entitled to charge between themselves, equal to 1.5 times the prescribed operation charges of that procedure. It is implied that this is conveyed to the patient's relatives and recorded in the Case-Sheet.

6. The charges for the profiles, as a package, as mentioned are already discounted.

7. Medical Care Charges, wherever required, will be extra @ Rs.250/-, Rs.370/- and Rs. 455/- per day in General Ward, Semi Private and Private Room respectively.

8. Charges for the Instruments/ Equipment wherever used by Surgeon will be 15% of the Surgery / procedures Charges.

9. Charges for Implant will be extra, as per actuals.

10. In case the patient wants to consult an outside consultant or the condition of the patient is such as requires an outside consultation, the patient will be charged at actuals.

11. Whenever a minor procedure like burn dressing, chemotherapy, etc. is done the consultant will be paid only one visit per day and not two visits, in addition to the procedure.

12. All blood & blood derivatives are provided against voluntary donation. No charges are levied for it. However, only processing and its testing is charged.

13. In case a patient is transferred from lower category to higher category after the surgery, he will be charged for surgery as for the higher category.

14. ORTHOPAEDICS - When Diagnostic Arthroscopy is followed by open surgery, charges will be made for surgical procedure plus 50% of the arthroscopy charges.

15. In Ophthalmology procedures/operations where only topical anaesthesia is used, no charge will be levied for anaesthesia; However, if anaesthesiologist is required as stand-by or monitored anaesthesia care it will be charged.

16. Miscellaneous Procedures in OPD/Casualty will be charged at General Ward Rates.

17. IPD and OPD patients will pay Rs.200/- and Rs.100/- respectively as registration charges.

18. Surgery/Procedure charges in Deluxe Category shall be 10% higher than Pvt. Category.

19. Surgery/Procedure charges in Suite Category shall be 15% higher than Deluxe Category.

20. O.T. Consumable Charges : Small - Rs. 410/-, Medium - Rs. 610/-, Large - Rs. -810/- & Big Large - 1,060/-

21. MLC Charges - Rs. 500/-

22. File Processing Charge - Rs. 300/- applicable to all TPA patients.

23. HOD/ Director / some Super Specialist charges Rs 1500 to 2500.IPD & OPD both. *(Condition apply)*

24. Govt. Taxes, GST & Levies as applicable.

25. Surgery Charges are related to the accommodation the patient occupies after the Surgery.

26. Laser charges Rs. 12,500/- only for Stone Laser.

27. Sonasite charges Rs. 500/- per procedure in ICU, OT & Ward.

28. All charges are in Indian Rupees.

***

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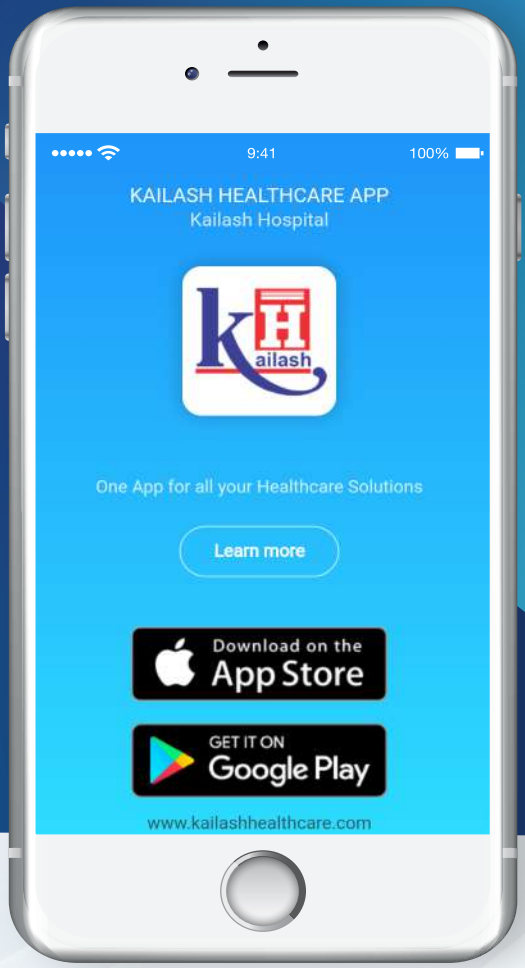

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