

VINAY VISHAL HEALTH CARE PVT.LTD
ROORKEE, DISTT. HARIDWAR
TARIFF STATEMENT-Mini Socl
Hospital Name-Vinay Vishal Healthcare Roorkee
Hospital Address-89 New Nehru Nagar Roorkee

OwnerName Vinay Vishal Healthcare Pvt.Ltd.

TPA Coordinator Name:- Rajeev Bhatnagar

Phone No.7055376698

OPD Consultation Fee-300 Rs

A Sr.no.	Room Charges Category	No of Beds	Room Rent (inclusive of nursing charge)
1	General Ward	13	1500
2	Semi private Room A/C	42	2050
3	Single Room A/C	10	3250
4	ICU	5	5650

ICU Charges Including: Monitor, Pulse Oximeter, Syringe Pump & Infusion Pump etc. (All Inclusive Charges/Day)

B. Professional Charges:

6	Duty Doctor/Day	300
7	Specialist/Day	1000

C. Operation Theatre Charges: All Inclusive

8	Operation Theatre/Hour	2000
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D: OPD Procedure

9	Biopsy -Small -Medium -Large	550 1000 1900
10	Spirometry	500
11	ECG	200
12	ECHO	1200
13	TMT	1500
14	EEG	900

Rajeev Bhatnagar

For Vinay Vishal Health Care Pvt. Ltd.

Director

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15	Endoscopy	1500
16	Colonoscopy	2500

E:Lab Charges:

17	Blood Group & Rh Typing	120
18	Complete Blood Count	220
19	Platelet Count	120
20	Haemoglobin	50
21	Blood Sugar- Fasting,PP.Random	150
22	HbA1C	440
23	Glucose Tolerance Test	240
24	Blood Urea	130
25	Serum Creatinine	130
26	Serum Electrolytes	230
27	LFT	550
28	Thyroid Function Test	450
29	Lipid Profile	450
30	Blood Widal	100
31	Smear for MP & MF-QBC	145
32	Dengue NS1 Antigen	1000
33	Dengue Serology	1000
34	CT/BT	80
35	Prothrombin	300
36	Partial Thromboplastin Time (aPTT)	250
37	Leptospira IgG	1100
38	Leptospira IgM	1800
39	RA Factor	250
40	CRP	250
41	Blood Uric Acid	130
42	Culture & Sensitivity Blood	900
43	Culture & Sensitivity Urine	350
44	ABGA	650
45	HIV I & II	350
46	HBsAg	320
47	Mantox	100
48	Sputum for AFB	210
49	Blood Typing & Cross Matching	120
50	Complete Urine Examlnat	100

For Vimay Vaidya
Savai Shain
Director

Dr

F:Others:

51	Ventilator Charges per day	3200
52	Dialysis per session	2000
53	Blood Transfusion Charges	500
54	Registration Charges	300
55	Ambulance (min. charge)	1500
	Non A/C	12/km
	A/C	15/km

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Soweli Dham
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Director

S. no	Procedure Name	Maximum Duration Of Stay	Private room	Semi-Pvt room	General Ward
	GENERAL SURGERY				
1	Minor Amputation	2 to 3	31550	28200	25100
2	Major Amputation	5 to 7	72200	640510	56750
3	Guillotine Amputation	5	45750	38750	33750
4	Revision Of Amputation stump	5	45750	38750	33750
5	Open-Appendicectomy	3 to 5	21100	17150	14650
6	Laparoscopic-Appendicectomy	3 to 5	23262	19218	16530
7	Open-Cholecystectomy	5 to 6	27500	21250	17750

8	Laparoscopic-Cholecystectomy	4	32002	23506	21000
9	Circumcision	1	10100	8150	7550
10	Fissurectomy with Sphincterotomy	3 to 4	18800	14950	12650
11	Fissurectomy Low	3 to 4	18000	14950	12650
12	Haemorrhoidectomy Routine	3 to 4	18800	14950	12650
13	Herniorrhaphy Inguinal Unilateral	3 to 4	18800	14950	12650
14	Hernioplasty Inguinal Excluding cost of Mesh	3 to 4	19950	16050	13650
15	Hernioplasty Femoral Excluding cost of Mesh	3 to 4	21100	17150	14650
16	Hernioplasty Umbilical Excluding cost of Mesh	3 to 4	19950	16050	13650
17	Hernioplasty Femoral Bilateral Excluding cost of mesh	4 to 5	26650	21400	18200
18	Hernioplasty Inguinal Bilateral Excluding cost of Mesh	4 to 5	25500	20300	17200
19	Hernioplasty Incisional Excluding cost of Mesh	4 to 5	24350	19200	16200

Dr

Souvik Shain
 For Virajy Vishal Health Care Pvt. Ltd.

20	Lymph Node Biopsy(Cervical/Axillary/Inguinal)Under GA	3	15350	11650	9650
21	Lipoma Under GA	2 to 3	16500	10700	2100
22	Perianal Abscess	2 to 3	12150	9600	8100
23	Pilonidal Sinus	2 to 3	16500	10700	9100
24	Modified Radical Mastectomy	5 to 7	33393	26287	22875
25	Simple Mastectomy	4 to 5	23286	18182	15275
26	Breast lumpectomy Under GA	1 to 3	24072	22015	19700
27	Thyroidectomy any type	5 to 7	51650	44350	38750
28	Intercostal drainage tube insertion	5 to 7	25750	18750	13990
OBSTETRICS & GYNECOLOGY					
29	Hysterotomy Abdominal with or without BSO	5 to 7	45000	40000	35000
30	Hysterotomy Abdominal with or without BSO Laparoscopic	5 to 7	60000	55000	50000
31	Hysterotomy Vaginal with or without pelvic floor Repair	5 to 7	45000	40000	35000
32	Hysterotomy LAVH with or without pelvic floor Repair	3 to 4	60000	55000	50000
33	D & C with Hysteroscopy	2 to 3	11000	8500	7100
34	Open Ruptured Ectopic Pregnancy	3 to 4	29000	24000	15000
35	Open wertheims	7 to 9			
36	Laparoscopic Myomectomy	5 to 7	70000	65000	60000
37	Normal delivery	1	13000	12000	11500
38	Caesarean section (booked)	3 to 4	28000	24000	22000
39	Caesarean section (unbooked)	3 to 4	32000	28000	26000
40	Caesarean section (emergency)	3 to 4	40000	35000	33000
ORTHOPAEDICS					
41	AcI/pcl/mcl Reconstruction Excluding cost of Implant	5	142500	131250	117750
42	Meniscectomy	5	79250	70750	62750
43	Carpal Tunnel Release	3 to 5	39500	34750	30650
44	Closed Reduction Dislocation Minor	2 to 3	27100	23900	21000
45	Closed Reduction Dislocation Major	3 to 4	33750	29250	25650
46	Implant Remo Minor	1	23900	21850	19550
47	Implant Remo Major	2	46650	42600	38100
48	Open Reduction Dislocation Minor	3 to 4	55600	50150	44650
49	Open Reduction Dislocation major	4 to 5	81800	74200	66200
50	ORIF of Fracture K wire Including cost of Implant	2	63900	59100	53100
51	ORIF of Fracture Plating Excluding cost of Implant	5 to 7	62000	54250	47750
52	Nailing Interlocking Excluding cost of Implant	5 to 7	73500	65250	57750
53	Fracture Neck of Femur Excluding cost of Implant	5 to 7	113750	103750	92750

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Sanat Kumar
North City Pvt. Ltd.

54	Laminectomy/Discectomy	5 to 7	119500	109250	97750
55	Spinal Fusion Where Implant is not going to be used	5 to 7	131000	12050	107750
56	Spinal Fusion Where implant is not going to be used Excluding cost of Implant	5 to 7	131000	120250	107750
57	Closed Reduction of Fracture under GA	3 to 4	32600	28150	24650
58	Hemiarthroplasty Excluding cost of Implant	5 to 7	85000	76250	67750
59	Total Knee Replacement Excluding cost of Implant	5 to 7	165500	153250	137750
60	Total Hip Replacement Excluding cost of Implant	5 to 7	125000	120000	115000
61	Dynamic Hip screw Excluding cost of implant	5 to 7	85000	76250	67750
UROLOGY & NEPHROLOGY					
62	Av Fistula for Dialysis	3 to 5	20985	17040	14550
63	TURP	5 to 7	40000	35000	30000
64	Varicocelectomy	2 to 3	22212	19225	16850
65	PCNL-Perc+Stenting	2	26640	23460	20700
66	URS Lithotripsy Including cost of DJ Stenting	2	22212	19225	16850
67	HemoDialysis Per Sitting	0	3450	3300	3000
68	D.J stenting Removal	1	6109	4833	4080
69	Cystoscopy with Biopsy	1	6012	7495	6500
70	Cystoscopy & DJ Stent Removal	1	12940	11367	10020
71	Orchidectomy Unilateral	2 to 3	16255	12570	10800
72	Orchidectomy Bilateral	2 to 3	18417	15595	12550
73	Pyelolithotomy	5 to 7	31812	25375	21500
74	Open Nephrectomy	7 to 9	25397	24765	23500
75	Nephrectomy	3 to 5	27310	23090	20050
CARDIOLOGY					
79	Coronary Angiogram	1	14700	13050	11550
80	Angioplasty PTCA Excluding cost of stent	3 to 4	153350	143650	129650
81	Renal Angioplasty Excluding cost of stent	4 to 5	99050	90700	87400
82	Vertebral Angioplasty Excluding cost of stent	4 to 5	99050	90700	87400
83	Balloon Valvotomy Excluding cost of Balloon	3 to 4	84350	77650	69650
84	Balloon Atrial Septostomy Excluding cost of Balloon	3 to 4	84350	77650	69650

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 For *[Handwritten]* Vishal Health Care Pvt. Ltd.
 Director

The Package Charges are maximum payable rates for END TO TREATMENT, including Room Rent/Nursing/Operation theater charges, Doctors/Surgeon charges, Asst Surgeon, anaesthetist charges, relevant Investigation, Blood & Blood products, Medicine & Consumables, Implant/Mesh/Prosthesis wherever applicable for the specified duration of stay unless specified otherwise.

If the customer develops complication during hospitalization, payable amount shall be modified, provided sufficient documentary proof of the same is submitted.

For Procedures requiring implant/mesh/prosthesis—please submit specification, implant sticker and invoice to corroborate the actual usage of particular Implant/mesh/prosthesis.

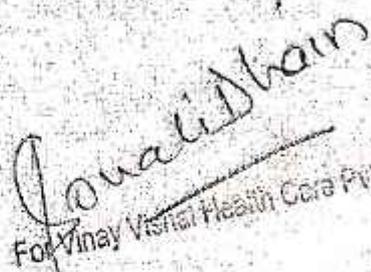
The packages rates are subject to revision as and when required when mutually agreed by both parties. This package is valid for 2 years from the date of acceptance.

Deviation from package: The Hospital is not supposed to charge anything extra from the patient, if the hospital is found to charge extra from the patient over and above the package, the same will be deducted from the amount payable to the hospital.

Disclaimer: This information is private and confidential for the exclusive use of Vinay Vishal Health Care Pvt.Ltd.

Note- 15% Discount applicable across the rate list.




For Vinay Vishal Health Care Pvt. Ltd.

Director

S.NO	TREATMENT		CHARGES
1	Consultation Fee		150.00
2	I.O.P.A. X-Ray/R.V.G		100.00
3	Oral Prophyllaxis (Sealing)		800.00
4	Curettage (Under L.A-3 sitting)	Per Sitting	1800.00
5	Flap surgery	Per Quadrant	1800.00
6	Gingivectomy (Per tooth)		500.00
7	Temporary Filling		150.00
8	Silver alloy Filling/ Tooth		400.00
9	Composite Filling /Tooth		500.00
10	Root canal Treatment/Tooth		1500.00
11	Apicectomy (Surgical) With Bone Graft		2000.00 4500.00
12	Extraction		250.00
13	Impaction (Surgical)		2000.00
14	Acrylic Crown	Tooth	800.00
15	Ceramic crown	Tooth	2000.00
16	Partial dentures	Tooth	280.00
17	Full Dentures		9000.00
18	Fixed Orthodontic Treatment	Both Arch Singhal Arch	30000.00 18000.00
19	Removable orthodontic treatment	Singhal Arch Both Arch	5500.00 7500.00
20	Trauma (Fracture of Jaws/Plate)	S.s Plate Titanium Plate	15000.00 20000.00
21	Minor Surgeries cysts Alveoloplasty		2800.00 2000.00
22	O.T Charge		3500.00
23	Incision & Drainage		3000.00
24	Bleaching/Sitting		3500.00

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Director

25	Laminates/Tooth		4000.00	
26	Post and Core/Tooth		900.00	
27	Ward	Genral	Day	900.00
		Special	Day	2000.00
28	T.G.N Neurectomy	Branch involed	25000.00	
29	Benign Bony and Soft Tissue Tumors		30000.00	
30	Salivary Dust Stones		12000.00	
31	General Anesthesia	Surgery	3500.00	
32	Easy Braces		9000.00	
33	Habit Breaking Appliances		6500.00	

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Sonali Dhain

For Vinay Vision & Smile Care Pvt. Ltd.

Dr Sonali Dhain

M.D.S

Director

X-RAY RATE LIST

S.NO.	X-RAY NAME	RATE	S.NO.	X-RAY NAME	RATE
1	Abdomen Erect	250	34	PNS Watersview	250
2	Rt Shoulder AP	250	35	PNS OM View	250
3	Rt Shoulder AP/Lat/Axi	300	36	Nasal Bone B/L	300
4	Lt Shoulder AP	250	37	T.M Joints	250
5	Lt Shoulder AP/Lat/Axi	300	38	T.M Joints open/close	300
6	Rt Humerus AP/Lat	300	39	K.U.B	250
7	Lt Humerus AP/Lat	300	40	C.Spine Lat	250
8	Rt Elbow AP/Lat	300	41	C.Spine AP/Lat	400
9	Lt Elbow AP/Lat	300	42	L.S Spine AP/Lat	400
10	Rt Forearm AP/Lat	300	43	L.S Spine Lat	250
11	Lt Forearm AP/Lat	300	44	D.L Spine AP/Lat	400
12	RT Wrist AP/Lat	300	45	D.L Spine Lat	250
13	Lt Wrist AP/Lat	300	46	Nasopharynx	250
14	Rt Hand AP/Obl	300	47	Nasal Bone	250
15	Rt Hand AP/Lat	300	48	Thoracic Lat	300
16	Lt Hand AP/Obl	300	49	Thoracic Spine AP/Lat	400
17	Rt Hand AP/Lat	300	50	S.T.N AP/Lat	300
18	Pelvis Both hip AP	250	51	S.T.N Lat	250
19	Rt Femur AP/Lat	300	52	Orbit	250
20	Lt Femur AP/Lat	300	53	OPG	350
21	Rt Knee AP/Lat	300	54	Chest Lat	250
22	Lt Knee AP/Lat	300	55	Chest PA	250
23	Rt leg AP/Lat	300	56	Chest AP	300
24	Lt Leg AP/Lat	300	57	Coccyx Spine AP/Lat	400
25	Rt Foot AP/Lat	300	58	Coccyx Spine Lat	200
26	Lt Foot AP/Lat	300	59	Barium Swallow	1000
27	Lt Foot AP/Obl	300	60	J.V.P	1500
28	Rt Ankle AP/Lat	300	61	B.M.F.T	1500
29	Lt Ankle AP/Lat	300	62	Barium Meal	1000
30	Rt Heel AP/Axi	300	63	Sinogram	1000
31	Lt Heel AP/Axi	300	64	R.G.U , M.C.U	1000
32	Mastoid B/L	300	65	T.T.C	1000
33	Orbit AP/Lat	300	66	Rt Foot AP/Obl	300

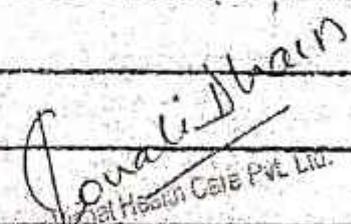
Emergency charges between 8 p.m to 9 a.m

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D.L.H.H.

CT-SCAN RATE LIST

SR.NO		RATE
1	NCCT HEAD (PLAIN)	RS.1300
2	CECT HEAD (CONTRAST)	RS.1800
3	NCCT FACE (3D)	RS.2500
4	NCCT PNS	RS.2500
5	CECT PNS	RS.3000
6	NCCT NECK	RS.2500
7	CECT NECK	RS.3000
8	NCCT CHEST	RS.3000
9	CECT CHEST	RS.3500
10	HRCT THORAX	RS.3500
11	NCCT WHOLE ABDOMEN	RS.3000
12	CECT WHOLE ABDOMEN	RS.5000
13	NCCT UPPER/LOWER ABDOMEN	RS.2500
14	CECT UPPER/LOWER ABDOMEN	RS.3500
15	NCCT C-SPINE	RS.2500
16	NCCT D.L SPINE / L.S.SPINE	RS.3000
17	CECT C /D.L / L.S SPINE	RS.3500
18	NCCT WHOLE SPINE	RS.5000
19	NCCT ORBIT	RS.2000
20	CECT ORBIT	RS.2500
21	NCCT TEMPORAL BONE	RS.3000
22	CECT TEMPORAL BONE	RS.4000
23	NCCT KID	RS.3000


 For Vinay
 Director
 Vinay Hospital Pvt. Ltd.

Dr.

ULTRASOUND RATE LIST

	USG NAME	RATE
1	USG WHOLE ABDOMEN	500
2	USG LOWER/UPPER ABDOMEN	400
3	USG OBSTETRIC	600
4	OBSTETRIC WITH WHOLE ABDOMEN	800
5	USG DOPPLER OBSTETRIC	1200
6	USG OBSTETRIC WITH BIOPHYSICAL PROFILE	1000
7	USG OBSTETRIC LEVEL-II	1500
8	USG PELVIS WITH ENDOVAGINAL STUDY (TVS)	800
9	USG FOLLICULAR STUDY	1200
10	USG SINGLE BREAST (SONO-MAMMOGRAPHY)	400
11	USG BOTH BREAST(SONO-MAMMOGRAPHY)	800
12	USG ARTERIAL DOPPLER ONE RT/LT UPPER LIMB	1500
13	USG ARTERIAL DOPPLER STUDY-LEFT/RIGHT LOWER LIMB	1500
14	USG ARTERIAL DOPPLER-BOTH UPPER/LOWER LIMBS	3000
15	USG DOPPLER VENOUS UPPER/LOWER LIMB SINGLE	1500
16	USG CAROTID DOPPLER BILATERAL	1500
17	USG DOPPLER (LOCAL PART)	1500
18	USG DOPPLER SCROTAL	1500
19	USG CRANIUM	800
20	USG OF NECK	600
21	USG THYROID	800
22	USG CHEST/THORAX	600
23	USG PROSTATE (TRUS)	800
24	USG SCROTUM	600
25	ULTRASOUND ONE JOINT	800
26	USG (ANY LOCAL PART)	800
27	USG ASPIRATION/TAPPING/FNAC	1500
28	USG GUIDED DRAINAGE	1000
29	USG LIVER ELASTOGRAPHY/ELASTOGRAPHY OF ANY PART	700
30	USG OF KUB/KINDEYS WITH PVR	600
31	USG SCREENING (WITHIN 7 DAYS)	300
32	USG EMERGENCY CHARGES	300

Sonal Dham

Dr.