

<b>X RAY AMOUNT</b>	
<b>CERVICAL SPINE AP AND LATERAL</b>	<b>300</b>
<b>LUMBAR SPINE AP AND LATERAL</b>	<b>300</b>
<b>DORSAL SPINE AP AND LATERAL</b>	<b>300</b>
<b>KUB</b>	<b>300</b>
<b>ABDOMEN</b>	<b>150</b>
<b>FINGER ( PALM ) AP AND OBLIQUE</b>	<b>280</b>
<b>SHOULDER AP AND LATERAL</b>	<b>280</b>
<b>WRIST AP AND LATERAL</b>	<b>280</b>
<b>ELBOW AP AND LATERAL</b>	<b>280</b>
<b>KNEE JOINT AP AND LATERAL</b>	<b>280</b>
<b>TIBIA FIBULA AP AND LATERAL</b>	<b>280</b>
<b>ANKLE JOINT AP AND OBLIQUE</b>	<b>280</b>
<b>PNS AP AND WATERS VIEW</b>	<b>300</b>
<b>SKULL AP AND LATERAL</b>	<b>300</b>
<b>CHEST PA VIEW</b>	<b>150</b>
<b>PBH ( PELVIS BOTH HIP )</b>	<b>150</b>
<b>COCCYX</b>	<b>300</b>
<b>CALCENIUM</b>	<b>280</b>
<b>FEMUR BONE</b>	<b>300</b>
<b>ORBIT</b>	<b>300</b>
<b>HUMERUS</b>	<b>280</b>

<b>PATHOLOGY AMOUNTS</b>	
<b>CBC</b>	<b>120</b>
<b>MALARIAL PARASITE</b>	<b>120</b>
<b>MALARIA ANTIGEN</b>	<b>200</b>
<b>WIDAL</b>	<b>120</b>
<b>URINE ROUTINE</b>	<b>80</b>
<b>BILLIRUBIN</b>	<b>150</b>
<b>DENGUE NSI , IGG , IGM</b>	<b>900</b>
<b>CREATININE</b>	<b>120</b>
<b>RENAL FUNCTION TEST ( RFT )</b>	<b>700</b>
<b>LIPID PROFILE</b>	<b>400</b>
<b>CHOLESTROL</b>	<b>120</b>
<b>LIVER FUNCTION TEST ( LFT )</b>	<b>700</b>
<b>CALCIUM</b>	<b>150</b>
<b>SGPT</b>	<b>120</b>
<b>SGOT</b>	<b>120</b>
<b>ESR</b>	<b>100</b>
<b>BLOOD GROUP ( BG )</b>	<b>70</b>
<b>FBS / PP ( BSL )</b>	<b>80</b>
<b>RBS</b>	<b>40</b>
<b>TRIPLE H SPOT</b>	<b>580</b>
<b>HIV</b>	<b>150</b>
<b>HCV</b>	<b>280</b>
<b>HBSAG</b>	<b>150</b>

## SONOGRAPHY

<b>FULL ABDOMEN ( ABDOMEN + PELVIS )</b>	<b>800</b>
<b>PELVIS</b>	<b>600</b>
<b>PELVIS ( TVS )</b>	<b>650</b>
<b>KUB</b>	<b>600</b>
<b>FOLLICULAR STUDY</b>	<b>700</b>
<b>FOLICULAR SINGLE SUTDY</b>	<b>200</b>
<b>OBSTETRICS</b>	<b>600</b>
<b>OBSTETRICS ( TWINS )</b>	<b>800</b>
<b>OBSTETRICS ( TRIPLETS)</b>	<b>1000</b>
<b>ANOMALY SCAN</b>	<b>1100</b>
<b>OBSTETRICS COLOR DOPPLER</b>	<b>1300</b>
<b>ARTERIAL + VENOUS LOWER LIMB DOPPLER</b>	<b>1300</b>
<b>ARTERIAL + VENOUS UPPER LIMB DOPPLER</b>	<b>1300</b>
<b>THORAX ( NECK ) ( THYROID )</b>	<b>800</b>
<b>CAROTID DOPPLER</b>	<b>900</b>
<b>BOTH BREAST</b>	<b>1000</b>
<b>SINGLE BREAST</b>	<b>600</b>
<b>LOCAL PART</b>	<b>800</b>
<b>SKULL</b>	<b>900</b>
<b>ORBIT ( EYES )</b>	<b>700</b>
<b>FNAC</b>	<b>1500</b>
<b>PLEURAL TAPPING</b>	<b>1500</b>
<b>SCORTUM</b>	<b>800</b>
<b>2D ECHO</b>	<b>1500</b>
<b>ECG</b>	<b>100</b>