

UNITED REPUBLIC OF TANZANIA MINISTRY OF HEALTH NATIONAL HEALTH INSURANCE FUND



PRICE SCHEDULE FOR NHIF CERTIFIED HEALTH FACILITIES

WITH EFFECT FROM 1st MARCH, 2024

LEVEL III & IV HOSPITALS

(ZONAL AND NATIONAL REFERRAL LEVEL FACILITIES)



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BENEFIT PACKAGE OF MEDICAL SERVICES AT THE NATIONAL AND ZONAL REFERRAL LEVEL FACILITIES

A: DEFINITION OF TERMS

General Practitioner is a person that qualifies as a Doctor of Medicine (MD), MBBS, MBChB, Doctor of Dental Surgery or Doctor of Dental Medicine who is legally registered to practice medicine or dentistry by the government in which such functions or action is performed. Other Medical cadres may be lawfully authorized by the Minister responsible for Health matters to prescribe, these are Assistant Medical Officers, Clinical officers, Assistant Clinical Officers, Nurses, Health Attendants, Dental Technicians and Dental Therapists.

Medical Specialists are medical or dental doctors with specialized training in a certain clinical discipline and fully registered by Medical Council of Tanganyika to practice as specialists.

Medical, dental and orthopedic appliances are devices used to support, align, prevent, and correct deformities or improve the function of movable parts of the body.

Inpatient is a patient who occupies a bed in a health facility for at least twenty four (24) hours in the course of treatment, examination, or observation OR a patient who is admitted to a health facility for treatment that requires at least twenty four (24) hours of stay.

Inpatient Services these are medical services provided to patients whose treatments require at least twenty four (24) hours or more stay in a health facility.

Outpatient is a patient who requires less than twenty-four (24) hours stay in a health facility in the course of treatment.

Outpatient Services These are medical services that require less than twenty four (24) hours stay in a health facility.

Prior approval services these are specific services that require Fund approval before accessing as listed on part 1.1.4.

Benefit package is a document that include medical services entitled to Fund's beneficiaries which is approved by the Minister responsible for Health from time to time, as per part IV of the NHIF Act Cap. 395.

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Fund means The National Health Insurance Fund.

Outpatient Consultation refers to all patient work-up made for clinical history and physical examination of the patient, order for diagnostic services required to properly evaluate the patient.

Co-payment is a portion of the cost for a certain service that is paid by the Fund's beneficiary.

Intensive Care Unit (ICU) is a unit in a hospital for patients who are critically ill, with the most **severe and life-threatening** illnesses or injuries which require highly intensive medical care and continuous observation, treatment and nursing care that otherwise would not be feasible in normal wards and HDU.

NB: Facility ICU should be authorized/certified by the Ministry of responsible for health matters.

High Dependency Unit (HDU) is a hospital unit, usually located close to the intensive care unit, where patients can be cared more extensively than in normal wards, but not to the point of intensive care.

Neonatal ICU is a hospital unit where a neonate who needs a higher level of medical and nursing support than provided in ordinary wards are cared for.

NB: For the purpose of reimbursement Neonatal ICU will be treated as HDU of corresponding level.

B: BENEFIT PACKAGE

The contents and conditions stipulated in this package are based on the Standard Treatment Guidelines, National Essential Medicine List, Basic Standards of Health Facilities and all specific condition treatment guidelines and protocols as approved by the Minister responsible for health matters. Health care benefits in this package include, but are not limited to the following:-

1. Outpatient Consultation Fee – This covers for costs related to Registration and Consultation of patients. Consultation fee as per NHIF benefit package

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includes registration, opening of patient file, history taking, physical examination, observations charges of a patient, professional costs for all medical personnel involved in patient care from entry to exit such as doctors, pharmacist, nurses, physiotherapists, laboratory staff, radiologists etc. For the Outpatient consultation fee to be paid, the following conditions will be considered;

- i. Payment to the facility will be according to its particular level as defined in the Basic Standards for Health facilities in Tanzania.
- ii. The fee shall be paid to cover a complete visit that includes a range of medical services rendered to the patient from entry point to exit.
- iii. In the event the patient returns for follow-up, collecting investigation results, review of results etc., the Fund shall not reimburse Outpatient Consultation fee.
- iv. Countersigning of claim forms by higher cadre medical professionals to patients attended by lower medical cadres or signing on behalf shall not be honored by the Fund.
- v. When a patient is being attended by a lower cadre medical professional and thereafter being referred to a higher medical cadre (specialist) within the same facility; then the Fund shall pay only one consultation fee of the higher cadre.
- vi. Outpatient consultation fee shall not be paid for patients attending for wound dressing, physiotherapy, occupational therapy, speech therapy, dialysis, radiation, chemotherapy services, ambulatory surgeries, injections, stich removal, medicine refill, refraction test, visual acuity investigation results (as per iii above) and all repetitive services.
- vii. No consultation fee shall be reimbursed on admitted patients as the fee is inclusive to inpatient charges.
- **2. Pharmaceutical Services** covers for the costs of medicines prescribed in Generic names and medical consumables as per the National Essential Medicines

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List (NEMLIT). However, each facility shall be allowed to prescribe and dispense medicines as indicated in STG/NEMLIT.

- **3. Investigation charges** covers for the costs of investigations, diagnostic tests and results interpretation as per the investigation list in the benefits package. These charges shall also include costs for all consumables used during the performed investigation.
- 4. Procedure/surgery fee: covers for the cost of medical procedures, minor, major and specialized surgical services performed at the facility. The surgical costs will cover for surgery charges, surgeon fee, anesthesia charges, theater charges, disposables, medicines and consumables, nursing care, dressing and other items used during surgery.
- **5. Inpatient Care Services** refers to the daily patient service in wards, Intensive Care Unit and High Dependent Unit.
- **6. Admission Charges** covers for consultation, accommodation, nursing care, oxygen therapy and medical consumables that are provided to the patient while admitted in the ward.
- **7. Physiotherapy, occupational therapy and rehabilitation services -**These services are provided to patients where the facility has such respective specialties.
- **8. Dental and Oral health Services** cover for inpatient and outpatient services for dental and oral health.
- **9. Medical, Surgical and Dental appliances** These are therapeutic and/or supportive appliances/devices related to medical, surgical, dental, orthopedic and cardiac services provided to an eligible beneficiary.

C: EXCLUDED SERVICES

Health Care Services not listed in this package are not covered by the Fund. These include, but not limited to the following:-

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- i. Diseases covered by the Government through vertical programs such as Tuberculosis, Leprosy etc.
- ii. Diseases and services under Government preventive and Public health programs funded through taxation such as Maternal and Child health services and Immunizations.
- iii. Major events of epidemics which cannot be forecasted or planned which have a special Ministry of Health Department of Disaster Preparedness and Management, such as cholera, floods, plague, measles, Dengue fever, Corona, COVID 19 etc.
- iv. AIDS which has a Collateral special Government programme under TACAIDS which deals and manages the aspects and treatments of the disease. The NHIF however treats all emerging complications and opportunistic infections such as abscesses, fungal infections and other diseases arising out of immunological compromise.
- v. Society disapproved and prohibited illegal undertakings such as illegal abortions, diseases emerging out of dependence or drug abuse, alcoholism, suicide and self-destruction while sane or sound mind.
- vi. Services covered by other similar Government schemes such as prosthetic appliances, wheel chairs, employment injuries that are covered by Workers Compensation Fund (WCF).
- vii. Services such as mortuary and burial services that are by employment regulations and ordinance the duty of care of the employer.
- viii. Services that are cosmetic in nature.

D: CONDITIONS FOR CONTROLLED SERVICES

1. Chemotherapy

Access to these services requires submission of the following:

- i. Valid prescription from a registered oncology specialist and some other specialties as per National Cancer Treatment Guideline;
- ii. Patient registration number from certified facility;
- **iii.** Letter from the attending oncologist/specialist explaining reasons for issuing, change of medication or dosage.

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Note:

- i. All requests should indicate the expected number of cycles/session as per expected complete treatment. The decision to initiate oncological treatment should be supported by a report from the Tumor Board or a panel of at least four multi-disciplinary specialists.
- **ii.** A signed chemotherapy administration schedule should be attached on submission of claims.

2. Radiotherapy services.

Access to these services requires submission of the following:

- Valid prescription from a registered oncology specialist with his/her signature;
- **ii.** The decision to initiate oncological treatment should be supported by tumor board report.
- iii. Patient registration number from certified facility;
- **iv.** Letter from the attending oncologist explaining reasons for issuing such service.

3. Hemodialysis, Peritoneal Dialysis, Immunosuppressants, Immunostimulants:

Access to these services requires submission of the following:

- i. Recommendation letter from a registered Kidney Specialist (Nephrologist) or Internal Medicine Specialist;
- ii. Prescription by a registered Nephrologist or Internal Medicine Specialist;
- iii. Patient registration number from certified facility;
- iv. Investigation results related to the request

4. CT-Scan and MRI

Access to these services requires submission of dully signed electronic request form from a specialist with the following information:-

- o Patient registration number from a certified facility.
- o Detailed clinical indication for the requested investigation

Note:

Upon submission of claims for reimbursement, the facility must submit imaging results/report.

5. Reading Glasses/Spectacles

Access to this service requires submission of the following:

- i. Dully filled prescription form from ophthalmologist/optometrist
- ii. Patient registration number from certified facility.

6. Medical, Surgical and Dental Appliances

Access to these services requires submission of the following:

- i. Valid prescription from a registered medical practitioner or specialist with his/her signature;
- ii. Patient registration number from certified facility.

7. EMG Needle

Access to this service requires submission of a dully filled and signed request form from a neurologist indicating the following:-

- Patient registration number from a certified facility.
- Detailed clinical indication for the requested investigation.
- Health facility official stamp of a certified health facility.

8. Complex Implants (TKR,THR, Implants for neuro and cardiac surgery)

Access to this service requires submission of a request with recommendations from a specialist along with the patient's registration number from certified facility.

Note:

- Upon submission of claims for reimbursement, the facility must submit a copy of request form
- ii. The Fund shall only pay 75% of the total cost of implant and the remaining (25%) shall be co-paid by employer or beneficiary.

9. Surgical Cardiac Services

Access to this service requires submission of a signed recommendation letter from a panel of specialists i.e. cardiologist, cardiovascular surgeon with patient registration number.

Note: The Fund shall only pay 75% of the total cost of stent/implant/device and the remaining 25% shall be co-paid by the employer or beneficiary.

E: RATIONAL SERVICE UTILIZATION:

1. Condition for patient referral

All referrals shall be done through NHIF systems where referral information shall be filled, that includes name of referring clinician, registration number, referral diagnosis, reasons for referral etc.

2. Condition for Claims Submission

All patient information related to the services claims shall be posted to NHIF electronic system within 24 hours from the time service was rendered.

3. Adherence to Treatment Guidelines

Case management of a patient should adhere to the requirements of the Standard Treatment Guidelines and National Essential Medicines List and other guidelines and protocols of care approved/adopted for use by the Ministry responsible for Health.

1.1 OUTPATIENT SERVICES

1.1.1 Outpatient Consultation fee

S/n	Item	Outpatient Consultation fee Price per Comp	olete Visit
	Code	Designation	NHIF Price
1	10003	Super specialist Consultation fee (MD/ /MBBS, MMED, Msc DDS/MDENT/Msc)	35,000
2	10002	Specialist Consultation fee (MD/ /MBBS, MMED,	25,000



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S/n	Item	Outpatient Consultation fee Price per Comp	olete Visit
	Code	Designation	NHIF Price
		DDS/MDENT	
3	10001	General Practitioner Consultation fee (MD/MBBS/DDS)	7,000

1.1.2 Normal Delivery

		NHIF
ITEM CODE	ITEM NAME	PRICE
6118	Normal Delivery and Delivery Package	40,000

Note:

- Normal delivery shall include episiotomy and repair charges.
- The cost covers for first and second degree vaginal tear repair.
- The normal delivery price is inclusive of the delivery pack cost; hence items which are included in the delivery pack/kit shall not be reimbursed when claimed separately.

1.1.3 Services that require prior Fund approval

The list includes the following services:

- ✓ CT Scan (with or without contrast)
- ✓ MRI (with or without contrast)
- ✓ Dialysis services
- ✓ Anti cancer Medicines
- ✓ Immunosuppressant and Immunostimulants
- ✓ Intraocular Coherence Tomography(IOCT)
- ✓ Implants and devices
- ✓ Selected Medicines
- ✓ EMG needle
- ✓ Medical, Surgical and Dental appliances
- ✓ Dentures



- ✓ Radiotherapy services
- ✓ Reading spectacles
- ✓ Surgical Cardiac Services
- ✓ Albumin infusion
- ✓ Polypylene Mesh

1.2 INPATIENT SERVICES

Admission charges

The Admission fee/charge includes accommodation, consultation, Oxygen therapy, Physiotherapy, occupational therapy, speech therapy, consumables and nursing care.

S/n	Item Code	Item Name	Facility Level	NHIF Prices
1	21	Admission Charges	National Referral Hospitals	40,000
2	21	Admission Charges	Zonal Referral Hospitals	35,000

1.3 INTENSIVE CARE UNIT (ICU) AND HIGH DEPENDENT UNIT (HDU) SERVICES

1.3.1 INTENSIVE CARE UNIT (ICU)

Item Code	Item Name	NHIF Price
22	Intensive Care Unit (ICU)	500,000

Note:

- The set prices for the ICU services include consultation and registration fees; admission fees, resuscitation services, laboratory and radiological investigations, dialysis, medicines, medical consumables, oxygen therapy nursing care and monitors services.
- In case the patient stays for more than five days, notifications to the Fund is required. **Failure to it, extra days shall not be reimbursed**.

1.3.2 HIGH DEPENDENCY UNIT (HDU) AND NEONATAL ICU



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23	High Dependency Unit (HDU)	60,000
263591	Neonatal ICU	60,000

The NHIF will cover for the costs involved in a High Dependence Unit and Neonatal ICU Care that is provided at National and Zonal referral level facilities. However, admissions beyond 5 days should be reported to the nearby NHIF Office with explanations for follow-up by the Fund. Failure to it, extra days shall not be reimbursed.

The set prices for the HDU and Neonatal ICU services include charges for consultation and registration fees, admission fee, nursing care and monitor services.

Other services such as laboratory and radiological investigations and medicines will be billed separately. These rates will only be applicable to those facilities with HDU and Neonatal ICU services as per standards imposed by the Ministry responsible for health matters and after being certified by the Fund.

1.3.3 EMERGENCY MEDICINE DEPARTMENT

Item Code	Item Name	NHIF Price
7556118	Resuscitation fee at EMD	60,000

The service shall be issued only to facilities with certified emergency department as per the Ministry responsible for health guidelines, and after being certified by the Fund. The set prices for cases attended at resuscitation rooms shall cover outpatient service fee, observation, oxygen therapy, airways placement, intubation, nursing care, ventilator and monitors. Other services such as laboratory diagnostic tests, radiological tests, and medicines will be billed separately as per itemized benefit package.

1.4 MEDICAL INVESTIGATIONS

These include Laboratory investigations and diagnostics imaging as listed in **Annex 1**

1.5 PHARMACEUTICAL SERVICES

These include Medicines and medical consumables as described in the Standard Treatment Guideline and National Essential Medicine List as listed in **Annex II**



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- Each facility shall prescribe and dispense medicines and medical consumables as per Essential Medicine List prescribing level, as it is reflected in the Standard Treatment Guideline.
- ii. Use of some selected antibiotics shall be honored only if is supported with clinical evidence of **Culture and sensitivity result** before initiation of medication as detailed in the table below.

	Antibiotics that need culture and sensitivity results			
S/N	Pharmacological name			
1	Meropenem Injection			
2	Vancomycin Injection			
3	Sulbactam +Ceftriaxone injection			
4	Amikacin Injection			
5	Cefepime Injection			
6	Clindamycin			
7	Colistin Injection			
8	Piperacillin +Tazobactam			

- iii. Culture and sensitivity results should be considered to determine the treatment regime. However, the issuance of cost-effective medicines should prevail for results with multiple sensitive drugs.
- iv. Strong antibiotics should be reserved for hospitalized cases with serious infections and few exceptional cases of patients with end stage renal failure on dialysis, prophylaxis and emergency conditions.
- v. On some special conditions, facilities are allowed to provide any of these antibiotics and perform culture and sensitivity(C/S) within 72 hours while substantive sessions may require C&S result.
- vi. Culture and sensitivity results should be attached while submitting claims for reimbursement.
- vii. A step-wise approach should be adhered to, as advocated in STG.

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The Fund shall not reimburse Artemether + Lumefantrine tablets, Artesunate injection, Malaria Rapid Diagnostic Test (MRDT) to public owned facilities and other facilities (owned by Private/Faith based organization) which have special agreement/ arrangement with the Government, where such products are supplied free of charge.

1.6 PROCEDURES AND SURGICAL SERVICES

Procedures and surgical services are categorized into Minor, Major and specialized which shall be performed in theatre by a medical doctor or specialist at that facility. The charges will be as per the price schedule as listed in **Annex III**

1.6.1 Root Canal treatment

Cost for Root canal services shall include filling materials per visit per procedure. Outpatient Consultation fee shall only be charged once during the first visit while charges for subsequent visits shall be inclusive in procedure charges.

1.6.2 Services with Co-Payments

For these services, the Fund shall reimburse a portion of the total cost while the remaining amount will be co-paid by the employer, employee or beneficiary depending on the terms and conditions of the respective product.

Sche	Schedule for Cardiac, Dental and Orthopaedic Implants/Procedures and Investigations for Co-Payment						
S/n	Item Code	Type of Service	Total Prices	NHIF Price	Co-Payment		
1	43198	Implant for Total Knee replacement (TKR)	4,000,000	3,000,000	1,000,000		
2	43197	Implant for Cemented - Total Hip replacement (THR)	3,000,000	2,250,000	750,000		
3	43189	Implant for Non- Cemented Total Hip replacement (THR)	6,500,000	4,875,000	1,625,000		
4	43261	Implant for V-P Shunt	300,000	225,000	75,000		
5	43271	Implant for Ventriculo-atrial shunt	225,000	168,750	56,250		



Sche	Schedule for Cardiac, Dental and Orthopaedic Implants/Procedures and Investigations for Co-Payment					
S/n	Item Code	Type of Service	Total Prices	NHIF Price	Co-Payment	
6	43262	Implant for Syringe peritoneal shunt	750,000	562,500	187,500	
7	43264	Implant for Omaya Reservoir	750,000	562,500	187,500	
8	43270	Implant for External ventricular CSF drain (EVD)	375,000	281,250	93,750	
10	7428	mplant for Craniotomy For Tumor Excision (including skull fixation 2,340,000 1,755,000 blates, screws ,ICP Monitor)		585,000		
11	43269	Implant for Craniotomy + Clipping aneurysm (including skull fixation plates, screws ,ICP Monitor, clips)	2,250,000	1,687,500	562,500	
12	43267	Implant for Anterior cervical discectomy and fusion (including Cervical cage, cervical plate, cervical screws)	2,340,000	1,755,000	585,000	
13	43265	Implant for Posterior cervical decompression and lateral mass screw fixation (including screws, Rods)	2,250,000	1,687,500	562,500	
14	43266	Implant for Lumbar Fusion with Transpedicular screw and Rods	2,000,000	1,500,000	500,000	
15	43268	Implant for Lumbar fusion with Transpedicular screw + cage Lumbar + Rods	2,250,000	1,687,500	562,500	
16	1163558	Stent(s) & Balloon(s) for Coronary Angioplasty	3,500,000	2,625,000	875,000	
17	6407	Prosthesis for Vascular Surgery By- pass	1,130,000	847,500	282,500	
18	6522	Fixed Orthodontic appliance fixing per jaw (procedure and material)	550,000	275,000	275,000	
19	1163357	Pacemaker device (Single chamber)	6,700,000	5,025,000	1,675,000	
20	1163358	Pacemaker device (Double chamber)	8,500,000	6,375,000	2,125,000	
21		CT Scan with contrast (all)	170 000	120 000	50,000	

21 CT Scan with contrast (all) 170,000 120,000 50,000 **NB:** All patients requiring above listed implants shall seek prior approval from the Fund.

1.7 PHYSIOTHERAPY, OCCUPATIONAL THERAPY AND REHABILITATION



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The charges shall cover outpatient Consultation fee for patient attending routine physiotherapy services. The Beneficiary shall be eligible to a maximum of twelve (12) physiotherapy visits in a month.

S/n	Item Code	Item Name	NHIF Prices
1	7202	Physiotherapy and Rehabilitative Service	15,000

1.8 MEDICAL, SURGICAL AND DENTAL APPLIANCES

Prior approval from the Fund shall be sought before issuance of these appliances. The list of Medical, surgical and dental appliances authorized for reimbursement are listed hereunder:

SN	Item Code	Medical and Orthopedic Appliances	Prices
1	7409	Axillary Crutch (Each)	40,000
2	7401	Hearing Aid (Pair)	60,000
3	7402	Neck Collar with shin support	40,000
4	7403	White cane (Walking/guiding stick for the blind)	50,000
5	7404	Knee Braces(each)	80,000
6	7405	Lumbar Belt and Trunk Corset	30,000
7	7406	Drop foot splint (each)	50,000
8	7444	Elbow crutch (each)	40,000
9	7408	Triangular arm sling	20,000
10	7410	Knee cap (Each)	15,000
11	7411	Knee support (Each)	15,000
12	7432	Ankle/Wrist Support	12,500
13	6561	Varicose stocking - Full (each)	25,000
14	12257	Varicose stocking -below knee (each)	8,750

1.9 HAEMO AND PERITONIAL DIALYSIS SERVICES

SN	Item Code	Description	Total prices
1	6234	Haemodialysis per session (Maximum 12 sessions per month)	200,000

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SN	Item Code	Description	Total prices
2	6233	Haemodialysis Catheterization including procedure and material -(Maximum 3 approvals per year)	300,000
3	7302	Arterial-Venous Fistula (AV- Fistula) including backup surgeries associated to any risks due to failure including procedure and material (Only 1 approval per year)	500,000
4	6412	Permanent Catheterization insertion including procedure and material -(Only 1 approval per year)	600,000
5	6413	Peritoneal Dialysis per all sessions in 24 hours	110,000
6	6414	Peritoneal Dialysis Catheter Insertion	120,000

- The set prices for Dialysis shall also include Heparin injection.
- No separate outpatient Consultation fee shall be paid for patients attending for routine and maintenance hemodialysis.
- National Guidelines for Dialysis services, Standard operating procedure and protocol for dialysis services issued by the Ministry responsible for health shall be adhered while offering such services.

1.10 OPTICAL SERVICES

THE CHICAL SERVICES		
Item Code	Type of Lenses and Frame	Prices for a pair of spectacles
7103	Reading glasses	20,000
• •	e Fund will be requested befo for this benefit is THREE years	•



ANNEX I

DIAGNOSTIC INVESTIGATIONS



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Syn Item Code Item Name Price 1 5001 A&B Scan (Eye) 20,000 2 5002 Adenosine Diaminase (ADA) - Pleural Fluid CSF 13,000 3 5003 AFB Staining 5,000 4 5004 Aldouse 14,000 5 5005 Aldolase 14,000 7 5009 Alpha Feto Protein (AFP Tumor Marker) 45,000 8 5011 Ambulatory Blood Pressure Monitoring (24Hrs) 15,000 9 5014 Ankle/Brachial Index Measurement 3,000 10 5374 Ante - Retrograde - Urography 80,000 11 5016 Anti Cardiolipin Levels 10,000 12 5018 Anti Phospolipid Antibody 10,000 13 5017 Anti - Scleroderma-70 15,000 14 5020 Anti-Hyaluronidase 15,000 15 5019 Anti-LA (Anti-SS-B) 15,000 18 5023 Anti-Hyaluronidase 15,000 19 <td< th=""><th></th><th colspan="4">Price Schedule for Investigations</th></td<>		Price Schedule for Investigations			
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4 5004 Albumin/Globulin Ratio 5,000 5 5005 Aldolase 14,000 6 5006 Aldosterone 14,000 7 5009 Alpha Feto Protein (AFP Tumor Marker) 45,000 8 5011 Ambulatory Blood Pressure Monitoring (24Hrs) 15,000 9 5014 Ankle/Brachial Index Measurement 3,000 10 5374 Ante + Retrograde - Urography 80,000 11 5016 Anti Cardiolipin Levels 10,000 12 5018 Anti Phospolipid Antibody 10,000 13 5017 Anti-Scleroderma-70 15,000 14 5020 Antibody Level Differentiation (IgG, IgA, IgM) 15,000 15 5019 Anti-Double Stranded DNA 15,000 16 5021 Anti-Hyaluronidase 15,000 17 5022 Anti-La (Anti-SS-B) 15,000 18 5023 Anti-neutrophil Cytoplasmic Antibodies - (pANCA or cANCA) 10,000 20 5133 Antinuclear Microsomal Antibod	2	5002	Adenosine Diaminase (ADA) - Pleural Fluid CSF	13,000	
5 5005 Aldolase 14,000 6 5006 Aldosterone 14,000 7 5009 Alpha Feto Protein (AFP Tumor Marker) 45,000 8 5011 Ambulatory Blood Pressure Monitoring (24Hrs) 15,000 9 5014 Ankle/Brachial Index Measurement 3,000 10 5374 Ante + Retrograde - Urography 80,000 11 5016 Anti Cardiolipin Levels 10,000 12 5018 Anti Phospolipid Antibody 10,000 13 5017 Anti-Scleroderma-70 15,000 14 5020 Antibody Level Differentiation (IgG, IgA, IgM) 15,000 15 5019 Anti-Double Stranded DNA 15,000 16 5021 Anti-Hyaluronidase 15,000 17 5022 Anti-Hyaluronidase 15,000 18 5023 Anti-Incurrentiophil Cytoplasmic Antibodies - (pANCA or cANCA) 10,000 19 5024 Antinuclear Microsomal Antibodies 20,000 21 5025 Anti-Ro (Anti	3	5003	AFB Staining	5,000	
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16 5021 Anti-Hyaluronidase 15,000 17 5022 Anti-LA (Anti-SS-B) 15,000 18 5023 Anti-neutrophil Cytoplasmic Antibodies - (pANCA or cANCA) 10,000 19 5024 Antinuclear Antibodies - (ANA) 17,000 20 5133 Antinuclear Microsomal Antibodies 20,000 21 5025 Anti-Ro (Anti-SS-A) Sjogren's Syndrome 10,000 22 5026 Arterial Blood Gases(ABG) / Venous Blood Gases(VBG) Analysis 10,000 23 5376 Arteriography / Venography 120,000 24 5405 Ascitic Fluid For ADA Test 17,000 25 5406 Ascitic Fluid for Cytology 5,000 26 5407 Ascitic Fluid for Gram stain 13,500 27 5382 Ascitic Fluid for protein 5,000 28 5408 Ascitic Fluid for sugar 14,500 29 5409 Ascitic Fluid for ZN stain 5,000 30 5028 ASOT (Anti Streptolysin O Titre) 5,000 31 5029 AST (SGOT) 4,000 32 5317	14	5020	Antibody Level Differentiation (IgG, IgA, IgM)	15,000	
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19 5024 Antinuclear Antibodies - (ANA) 17,000 20 5133 Antinuclear Microsomal Antibodies 20,000 21 5025 Anti-Ro (Anti-SS-A) Sjogren's Syndrome 10,000 22 5026 Arterial Blood Gases(ABG)/ Venous Blood Gases(VBG) Analysis 10,000 23 5376 Arteriography/Venography 120,000 24 5405 Ascitic Fluid For ADA Test 17,000 25 5406 Ascitic Fluid for Cytology 5,000 26 5407 Ascitic Fluid for Gram stain 13,500 27 5382 Ascitic Fluid for protein 5,000 28 5408 Ascitic Fluid for sugar 14,500 29 5409 Ascitic Fluid for ZN stain 5,000 30 5028 ASOT (Anti Streptolysin O Titre) 5,000 31 5029 AST (SGOT) 4,000 32 5317 Audiometry (Pure tone Audiometry) 35,000 34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swal	17	5022	Anti-LA (Anti-SS-B)	15,000	
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26 5407 Ascitic Fluid for Gram stain 13,500 27 5382 Ascitic Fluid for protein 5,000 28 5408 Ascitic Fluid for sugar 14,500 29 5409 Ascitic Fluid for ZN stain 5,000 30 5028 ASOT (Anti Streptolysin O Titre) 5,000 31 5029 AST (SGOT) 4,000 32 5317 Audiometry (Pure tone Audiometry) 35,000 33 5030 Barium Enema 70,000 34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	24	5405	Ascitic Fluid For ADA Test	17,000	
27 5382 Ascitic Fluid for protein 5,000 28 5408 Ascitic Fluid for sugar 14,500 29 5409 Ascitic Fluid for ZN stain 5,000 30 5028 ASOT (Anti Streptolysin O Titre) 5,000 31 5029 AST (SGOT) 4,000 32 5317 Audiometry (Pure tone Audiometry) 35,000 33 5030 Barium Enema 70,000 34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	25	5406	Ascitic Fluid for Cytology	5,000	
28 5408 Ascitic Fluid for sugar 14,500 29 5409 Ascitic Fluid for ZN stain 5,000 30 5028 ASOT (Anti Streptolysin O Titre) 5,000 31 5029 AST (SGOT) 4,000 32 5317 Audiometry (Pure tone Audiometry) 35,000 33 5030 Barium Enema 70,000 34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	26	5407	Ascitic Fluid for Gram stain	13,500	
29 5409 Ascitic Fluid for ZN stain 5,000 30 5028 ASOT (Anti Streptolysin O Titre) 5,000 31 5029 AST (SGOT) 4,000 32 5317 Audiometry (Pure tone Audiometry) 35,000 33 5030 Barium Enema 70,000 34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	27	5382	Ascitic Fluid for protein	5,000	
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31 5029 AST (SGOT) 4,000 32 5317 Audiometry (Pure tone Audiometry) 35,000 33 5030 Barium Enema 70,000 34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	29	5409	Ascitic Fluid for ZN stain	+	
32 5317 Audiometry (Pure tone Audiometry) 35,000 33 5030 Barium Enema 70,000 34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	30	5028	ASOT (Anti Streptolysin O Titre)	5,000	
33 5030 Barium Enema 70,000 34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	31	5029	AST (SGOT)	4,000	
34 5031 Barium Meal 70,000 35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	32	5317	Audiometry (Pure tone Audiometry)	35,000	
35 5032 Barium Meal Follow Through 70,000 36 5033 Barium Swallow 70,000	33	5030	Barium Enema	70,000	
36 5033 Barium Swallow 70,000	34	5031	Barium Meal	70,000	
,	35	5032	Barium Meal Follow Through	70,000	
37 5034 Beta HCG -Quantitative 30,000	36	5033	Barium Swallow	70,000	
	37	5034	Beta HCG -Quantitative	30,000	





		Price Schedule for Investigations	
S/n	Item Code	Item Name	Price
38	5036	Bilirubin Level (Direct/Indirect)	5,000
39	5037	Bilirubin Total	5,000
40	5038	Bleeding Factor VIII	16,000
41	5039	Bleeding/Clotting Time	2,000
42	5040	Blood Culture and Sensitivity (Aerobic/Anaerobic)	16,000
43	5041	Blood Grouping/Rh Typing and Cross matching	1,800
44	5042	Blood Urea Nitrogen (BUN)/ Serum Urea	5,000
45	5043	Bone Marrow Aspirates - Processing and Interpretation/Cytology	70,000
46	5044	Bone Tissue Biopsy - Processing and Interpretation	60,000
47	5045	Bone Trephine Biopsy - Processing and Interpretation	60,000
48	5049	Cancer Antigen CA 19.9	40,000
49	5050	Carcino Embryonic Antigen (CEA)	30,000
50	5051	Chylamidia PCR - Urine/swab or MIF serum	10,000
51	5052	Clostridium Deficile Toxin - ELISA	5,000
52	5053	Compatibility Testing (Rhesus)	5,000
53	5054	Compliment Fixation Tests(C3, C4) each	10,000
54	5055	Coombs Test (Direct/Indirect)	8,000
55	5056	Cryptococcal Antigen Test	15,000
56	5412	Cryptococus Neoforman Antigen	35,000
57	5058	CSF - Microbiology (Gram/Indian Ink/ Z/N Staining)	10,000
58	5060	CSF- Culture/Sensitivity	15,000
59	5059	CSF -Glucose	4,000
60	5061	CSF -Protein	5,000
61	5062	CT Scan Abdomen	120,000
62	501023	CT Scan Ankle	120,000
63	5371	CT Scan Brain	120,000
64	510125	Ct scan wrist(120,000
65	510124	CT scan elbow(120,000
66	5063	CT Scan Abdominopelvic	120,000
67	5311	CT Scan Angiography	120,000
68	5316	CT Scan Cervical Spine	120,000
69	5064	CT Scan Chest	120,000
70	5065	CT Scan Chest + Abdomen	120,000
71	5312	CT Scan Coronary/Cardiac Angiography	120,000
72	5066	CT Scan Guided Biopsy	120,000
73	5067	CT Scan Head and or Neck	120,000
74	5379	CT scan Hip	120,000
75	5310	CT Scan IVU	120,000
76	5380	CT scan Knee	120,000





	Price Schedule for Investigations			
S/n	Item Code	Item Name	Price	
77	5315	CT Scan Lumbar Spine	120,000	
78	5314	CT Scan Lumbosacral Spine	120,000	
79	5069	CT Scan Para Nasal Sinuses (PNS)	120,000	
80	5068	CT Scan Pelvis	120,000	
81	5383	CT scan Skeletal Survey (Total Spine)	120,000	
82	5070	CT Scan Temporal Bone	120,000	
83	5366	CT scan Thoracic spine	120,000	
84	5384	CT scan Thoraco -Lumbar	120,000	
85	5072	Cytology of Fluid/Tissue & interpretation	60,000	
86	5073	Cytomegalovirus - CMV (IgM & IgG)	20,000	
87	5074	D. Dimer/Fibrinogen Degradation Products (FDPs)	8,000	
88	5075	Distraction Test	15,000	
89	5076	Dobutamine Stress Test - Trans Thoracic Echo (TTE)	70,000	
90	5077	Drug Susceptibility Test	45,000	
91	5219	ECG-Stress/Exercise (Treadmill Test)	25,000	
92	5079	Echocardiography - ECHO	40,000	
93	5082	Electro Encephalogram (EEG)	80,000	
94	5078	Electrocardiogram (ECG) - Resting	15,000	
95	6349	Electrocardiography (ECG) Holter Services 24/48 hours	25,000	
96	5083	Electromyography (EMG)	50,000	
97	5084	Electro-Retinogram (ERG)	35,000	
98	5085	Epstein-Barr Virus (EBV)	16,000	
99	5086	Erythrocyte Sedimentation Rate (ESR)	2,000	
100	5386	Esophagogastroduodenoscopy (OGD) with or without Biopsy	107,000	
101	5087	Estradiol (E2)/ Estrogen	25,000	
102	5088	Evoked Potentials (Muscular)	40,000	
103	5008	Exfoliative Cytology All Smears - Processing and Interpretation	65,000	
104	5092	Fine Needle Aspiration Cytology FNAC - Processing and Interpretation	75,000	
105	5093	Fistulography	60,000	
106	5090	Follicular Stimulating Hormone (FSH)	15,000	
107	5095	Free Testosterone	15,000	
108	5091	Full Blood Picture(FBP) / + Peripheral Smear	8,000	
109	5097	Glucose 6 Phosphate Dehydrogenase(G-6PD)	12,500	
110	5098	Glucose- Fasting/Random/Postprandial/ Oral Glucose Tolerance Test	1,300	
111	5099	Growth Hormone (GH)	25,000	
112	5100	H. Pylori Antigen test	6,000	
113	5102	HBA 1C (Glycosylated Hemoglobin)	13,300	
114	5103	HB-Electrophoresis	30,000	
115	5105	Hemoglobin (HB)	1,400	





Price Schedule for Investigations			
S/n	Item Code	Item Name	Price
116	5106	Hepatitis A IgM Antibody	10,000
117	5107	Hepatitis B Surface antigen Test	10,000
118	5108	Hepatitis C Antibody Test	10,000
119	5109	Herpes Simplex Virus - II (H.S.V. II - IgG & IgM)	10,000
120	5110	Herpes Simplex Virus -I (H.S.V. I - Ig G & IgM)	10,000
121	5113	High Vaginal Swab Culture and Sensitivity (HVS Culture &Sensitivity)	16,000
122	5313	High Vaginal Swab Gram Stain and wet preparation	4,000
123	5115	Hysterosalpingography (HSG)/(Fluoroscopy)	70,000
124	5116	IgE Radio Allergosorbent Test (RAST)	7,000
125	5118	Insulin Level	25,000
126	5119	Intra Ocular Coherence Tomography (IOCT) Bilaterally (For one or both eyes)	20,000
127	5122	LDL Cholesterol (Calculated)	5,000
128	5126	Lupus Anticoagulant	10,000
129	5127	Lupus Erythromatosis Cell (LE Cell)	7,000
130	5128	Luteinizing Hormones (LH)	15,000
131	5134	MRI - Total Spine	250,000
132	5135	MRI- Angiography	250,000
133	5136	MRI- Cervical	250,000
134	5362	MRI- Chest	250,000
135	5138	MRI- Lumbar	250,000
136	5140	MRI-Abdomen	250,000
137	5141	MRI-Brain	250,000
138	5129	Malaria Blood Smear (B/S)	1,600
139	5318	Malaria Rapid Diagnostic Test (MRDT)	1,600
140	5132	Microfilaria	2,000
141	5390	MRI-Abdomen + Chest	250,000
142	5391	MRI-Abdomen + Pelvis	250,000
143	5414	MRI-Ankle	250,000
144	5392	MRI-Brain + Cervical	250,000
145	5360	MRI-Knee	250,000
146	5415	MRI-Elbow	250,000
147	5393	MRI-Hip	250,000
148	5394	MRI-Lumbar - Sacral	250,000
149	5396	MRI-Neck	250,000
150	5416	MRI-Shoulder	250,000
151	5397	MRI-Thoraco-Lumbar	250,000
152	5417	MRI-Wrist	250,000
153	5143	Mycobacteria Culture	20,000
154	5145	Myoglobin	50,000





		Price Schedule for Investigations	
S/n	Item Code	Item Name	Price
155	5146	Nerve Conduction Tests	40,000
156	5398	Orthopantomography - Digital (OPG)	20,000
157	5150	Osmotic Fragility Test	6,000
158	5151	Partial Thromboplastin Time(PTT)	10,000
159	5152	Percentage Iron Saturation	25,000
160	5418	Pericardial Fluid Gram Stain	5,000
161	5419	Pericardial Fluid Protein	5,000
162	5420	Pericardial Fluid Sugar	5,000
163	5421	Pericardial Fluid ZN Stain	5,000
164	5153	Plasma Catecholamines & Metanephrines Level	60,000
165	5154	Platelet counts	2,000
166	5155	Pleural/Peritoneal Fluid Culture and sensitivity	15,000
167	5156	Pneumocystis Indirect Fluorescent Antibody (IFA)	15,000
168	5157	Progesterone	15,000
169	5158	Prolactin	15,000
170	5159	Prostatic Specific Antigen (PSA) - Free	35,000
171	5162	Prothrombin Time - Interanational Normalized Ratio (PT - INR)	10,000
172	5160	Prothrombin/Thrombin Time (PT)	5,000
173	5163	Pus Culture & Sensitivity	20,000
174	5167	Reticulocyte Count	2,000
175	5169	Reversibility Test (Incentive Spirometry)	70,000
176	5170	Rhesus Factor (Rh Factor)	5,000
177	5329	Rheumatoid Factor	5,000
178	5328	RPR/Syphils rapid test	1,900
179	5172	Rubella IgG AND IgM	20,000
180	5174	Seminalysis -Processing and Interpretation	35,000
181	5450	Serum Protein (Albumin)	10,000
182	5175	Serum ACTH	10,000
183	5422	Serum Alkaline Phosphatase	5,000
184	5010	Serum ALT (SGPT)	5,000
185	5423	Serum Amylase	5,000
186	5176	Serum Calcium	5,000
187	5177	Serum Carbamazepine	20,000
188	5178	Serum Carbon Dioxide	5,000
189	5179	Serum Chloride	5,000
190	5180	Serum Cholesterol	5,000
191	5182	Serum Copper	20,000
192	5183	Serum Cortisol (AM and PM)	25,000
193	5184	Serum C-Reactive protein	9,000





	Price Schedule for Investigations			
S/n	Item Code	Item Name	Price	
194	5185	Serum Creatine Kinase - (CK, CK - MB, MB%/BB/MM) / Cardiac triple marker	15,000	
195	5208	Serum Creatinine	5,000	
196	5187	Serum Ferritin	20,000	
197	5188	Serum Folate	20,000	
198	5189	Serum Gentamycin	17,500	
199	5104	Serum HDL Cholesterol	5,000	
200	5190	Serum Iron	20,000	
201	5191	Serum Lactate Dehydrogenase	20,000	
202	5424	Serum Lipase	25,000	
203	5192	Serum Lithium	20,000	
204	5193	Serum Magnesium	5,000	
205	5196	Serum Phosphorus	5,000	
206	5197	Serum Potassium	5,000	
207	5199	Serum Protein C	5,000	
208	5200	Serum Protein Electrophoresis	20,000	
209	5201	Serum Protein S	15,000	
210	5202	Serum Sodium	5,000	
211	5425	Serum Triglycerides	4,000	
212	5205	Serum Troponin T or I	30,000	
213	5209	Sialography	60,000	
214	5210	Sickle cell screening test	3,000	
215	5212	Sinography	60,000	
216	5213	Skin Scraping (KOH)/Fungus culture	5,000	
217	5214	Spirometry Peak Flow	15,000	
218	5215	Sputum Culture & sensitivity	15,000	
219	5216	Stool Analysis	2,000	
220	5217	Stool Culture & Sensitivity	12,000	
221	5218	Stool Occult Blood	2,000	
222	5221	Testosterone level	25,000	
223	5452	Tetra- iodothyroxine - T4	10,000	
224	5222	Throat Swab Culture and Sensitivity	15,000	
225	5451	Thyroid stimulating Hormone-TSH	10,000	
226	5224	Tissue Biopsy- Processing and Histological Interpretation	50,000	
227	5225	Total IgE	8,000	
228	5226	Total Iron Binding Capacity (TIBC)	50,000	
229	5227	Total Protein	5,000	
230	5228	Toxoplasmosis IgG	5,000	
231	5229	Toxoplasmosis IgM	5,000	
232	5230	Trans-Esophageal Echo (TEE)	80,000	





		Price Schedule for Investigations	
S/n	Item Code	Item Name	Price
233	5231	Treponema Pallidum Haemaglutination - TPHA/TPPA (Confirmation)	12,000
234	5223	Tri- iodothyroxine- T3	10,000
235	5233	Tympanometry (Tympanography)	16,000
236	5235	Urethrography (Ante/Retrograde)	70,000
237	5236	Uric Acid	5,000
238	5237	Urinalysis	1,400
239	5238	Urine - Protein/Creatinine /Electrolytes -24 Hrs	3,000
240	5240	Urine Cortisol	25,000
241	5241	Urine Creatinine	5,000
242	5242	Urine Culture & Sensitivity	15,000
243	5243	Urine For Bence - Jones Proteins (UBJP)	10,000
244	5244	Urine For Pregnancy Test (UPT)	800
245	5246	Urine VanillyMandelic Acid (VMA) & Metanephrines -24 -Hours	80,000
246	5426	Uroflometry (UFM)	30,000
247	5402	USS - Abdomen and pelvis	14,000
248	5248	USS - Cranial	14,000
249	5249	USS - Doppler	14,000
250	5250	USS - Focused Assessment With Sonograph In Trauma(FAST)/Emergency	14,000
251	5252	USS - KUB	14,000
252	5253	USS - Obstetric	14,000
253	5255	USS - Small Part (e.g. Scrotum Etc)	14,000
254	5234	USS Guided procedures	35,000
255	5256	Valproic Acid	1,500
256	5261	Very Low Density Lipoprotein (VLDL)	5,000
257	5259	Vestibular Test	15,000
258	5263	X-Ray - Chest - PA	16,000
259	5264	X-Ray - Chest (AP and Lateral)	16,000
260	5265	X-Ray - Arm (AP & Lateral)	16,000
261	5266	X-Ray - Both Knees (AP & Lateral)	16,000
262	5267	X-Ray - Calcaneum (AP & Lateral)	16,000
263	5268	X-Ray - Cervical Spine - Oblique	16,000
264	5269	X-Ray - Cervical Spine (AP& Lateral)	16,000
265	5270	X-Ray - Clavicle	16,000
266	5271	X-Ray - Elbow (AP & Lateral)	16,000
267	5272	X-Ray - Facial Bones/Orbit	16,000
268	5273	X-Ray - Femur (AP & Lateral)	16,000
269	5274	X-Ray - Finger (AP& Lateral)	16,000
270	5275	X-Ray - Foot (AP& Lateral)	16,000
271	5276	X-Ray - Forearm (AP& Lateral)	16,000





		Price Schedule for Investigations	
S/n	Item Code	Item Name	Price
272	5277	X-Ray - Hand (AP& Lateral)	16,000
273	5278	X-Ray - Hip (AP& Lateral)	16,000
274	5279	X-Ray - Knee AP/Lateral	16,000
275	5280	X-Ray - Leg (Tibia& Fibula)	16,000
276	5281	X-Ray - Lumbar Spine - Oblique	16,000
277	5282	X-Ray - Lumbar Spine (AP & Lateral)	16,000
278	5283	X-Ray - Mandible	16,000
279	5284	X-Ray - Mastoid Bilateral	16,000
280	5285	X-Ray - Spine (AP &Lateral)	16,000
281	5306	X-Ray - Whole Spine and Pelvis (AP &Lateral)	16,000
282	5287	X-Ray - abdomen - KUB	16,000
283	5288	X-Ray - abdomen - Supine/Erect	16,000
284	5289	X-Ray - Abdomen Plain or equivalent studies	16,000
285	5290	X-Ray - Bitewing View	16,000
286	5427	X-Ray - Foreign Body Removal	20,000
287	5120	X-Ray - Intravenous Urography (IVU)	60,000
288	5130	X-Ray - Mammography	55,000
289	5291	X-Ray - Nasal Bones	16,000
290	5292	X-Ray - Occlussal View	16,000
291	5293	X-Ray - OPG (Dental Panorama View)	16,000
292	5294	X-Ray - Paranasal Sinuses	16,000
293	5295	X-Ray - Periapical View	10,000
294	5168	X-Ray - Retrograde Pyelography	75,000
295	5296	X-Ray - Ribs	16,000
296	5297	X-Ray - Scapula	16,000
297	5298	X-Ray - Shoulder (AP & Lateral)	16,000
298	5299	X-Ray - Skeletal Survey Under 5Yrs	16,000
299	5300	X-Ray - skull (AP& Lateral)	16,000
300	5302	X-Ray - Sternum Or Sterno-clavicular Joint	16,000
301	5403	X-Ray - Temporo-Mandibular Joints (TMJ)	16,000
302	5303	X-Ray - horacic Spine - (AP And Lateral)	16,000
303	5304	X-Ray - horacic Spine - Oblique	16,000
304	5305	X-Ray - Toe (AP & Lateral)	16,000
305	5048	Cancer Antigen 125 (CA 125 or Carbohydrate Antigen 125 or MUCIN 16)	40,000
306	5096	Gamma GT (GGT)	5,000
307	5309	X-Ray - Pelvis and Femur (AP & Lateral)	16,000
308	5404	X-RAY - Thoraco-Lumbar (AP/Lateral)	16,000
309	5307	X-Ray - Wrist (AP & Lateral)	16,000
310	5308	X-Ray - Ankle (AP & Lateral)	16,000





Price Schedule for Investigations				
S/n	Item Code	Item Name	Price	
311	5094	Fluorescent Angiography	100,000	

ANNEX I DIAGNOSTIC INVESTIGATIONS





NOTE:

Prices for MRI includes with or without contrast while prices for CT Scan are for without contrast

ANNEX II MEDICINES AND MEDICAL CONSUMABLES



1.1 LIST OF MEDICINES:

No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
1. AN	AESTHETIC	S AND ANTIDOTES				
1	11001	Lidocaine	В	Gel 2%,5%	Tube	4,200
2	11002	Lidocaine	Α	Injection (Hydrochloride) 1%, 2%	Vial	2,723
2. AN	ALGESICS,	ANTIPYRETICS, NON-STEROIDA	L ANTI-IN	FLAMMATORY MEDICINES (NSAIMs)		
2.1 No	on-opioids	and non-steroidal anti-inflamn	natory me	edicines (NSAIMs)		
3	11005	Acetyl salicylic Acid	Α	Solid oral dosage form:300mg	Tablet	24
4	363083	Dexketoprofen	S	Solid Oral Dosage Forms: 25mg	Tablet	858
5	11006	Diclofenac	Α	Injection: 25mg/ml in 3ml	Vial	195
6	11007	Diclofenac	С	Solid oral dosage form:(sodium) 50 mg	Tablet	20
7	11009	Diclofenac	С	Solid oral dosage form (Potassium): 50mg	Tablet	1,676
8	11010	Diclofenac	С	Solid oral dosage form (SR): 100mg	Tablet	148
9	11014	Ibuprofen	Α	Solid oral dosage form: 200mg	Tablet	31
10	363084	Ibuprofen	Α	Solid oral dosage form:400mg	Capsule	380
11	11015	Ibuprofen	Α	Oral liquid: 100mg/5ml in 100ml	Bottle	1,932
12	11018	Ketoprofen	S	Solid Oral Dosage Form: 50mg	Tablet/C apsule	309
13	363085	Ketoprofen	S	Solid Oral Dosage Form:75mg	Tablet/C apsule	528
14	363086	Ketoprofen	S	Solid Oral Dosage Form:200mg	Tablet/C apsule	605
15	11538	Ketoprofen	S	Gel 2.5% w/w (30gm)	Tube	6,227
16	363087	Mefenamic acid	В	Solid oral dosage form: 500mg	Tablet	338
17	11025	Piroxicam	Α	Solid oral dosage form:20mg	Tablet	40
18	11021	Meloxicam	D	Solid oral dosage form: 15mg	Tablet/C apsule	169
19	11022	Meloxicam	D	Solid oral dosage form: 7.5mg	Tablet/C apsule	134
20	11023	Paracetamol	Α	Oral liquid form:120mg/5ml	Bottle	1,105
21	11024	Paracetamol	Α	Solid oral dosage form: 500mg	Tablet	26
22	11542	Paracetamol	A	Suppository: 125mg	Supposit ory	743
23	12057	Paracetamol	D	Infusion 10mg/ml	Bottle	4,253
24	11016	Ibuprofen + Paracetamol	A	Solid oral dosage form: 400mg + 325mg	Tablet	144
25	355803	Paracetamol + Diclofenac	В	Solid oral dosage:form:500mg/50mg	Tablets	40
26	12056	Ibuprofen and Paracetamol	В	Oral liquid: 100mg/5ml in 100ml	Bottle	2,321
2.2 0	pioid analg	gesics				



Alleens

No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price		
27	363088	Morphine	С	Oral liquid: 10mg/5ml	1 Litre Bottle	756		
28	11027	Morphine	С	Injection: 10mg/ml in 1ml	Vial	1,680		
29	11028	Morphine	С	Solid oral dosage form: 10mg	Tablet	30		
30	11029	Tramadol Hydrochloride	С	Solid oral dosage form:50mg	Capsule	78		
31	11030	Tramadol Hydrochloride	С	Injection: 50mg/ml in 1ml, 2ml	Ampule	910		
32	363089	Fentanyl	S	Injection: 100mcg/2ml	Ampule	6,600		
33	363090	Buprenorphine	S	Solid oral dosage form:2mg	Tablet	13,200		
34	363091	Methadone	С	Solid oral dosage form: 10mg	Tablet	40		
35	11054	Naloxone	В	Injection: 0.4mg/ml	Vial	6,000		
2.3 M	edicines us	sed to treat gout						
36	11031	Allopurinol	В	Solid oral dosage form: 300mg	Tablet	247		
37	11032	Allopurinol	В	Solid oral dosage form: 100mg	Tablet	214		
38	12159	Febuxostat	S	Solid oral dosage form: 40mg	Tablet	684		
39	363093	Febuxostat	S	Solid oral dosage form: 80mg	Tablet	948		
2.4 D	2.4 Disease modifying agents used in rheumatoid disorders (DMARDs)							
40	11033	Sulfasalazine	D	Solid oral dosage form: 500mg	Tablet	1,200		
3. AN	TIALLERGI	CS AND MEDICINES USED IN ANA	APHYLAXI	S				
41	11034	Betahistine	С	Solid oral dosage form: 8mg	Tablet	447		
42	363094	Betahistine	С	Solid oral dosage form: 16mg	Tablet	581		
43	11038	Cetirizine Hydrochloride	Α	Solid oral dosage form:10mg	Tablet	26		
44	11039	Cetirizine Hydrochloride	Α	Oral liquid: 5mg/5ml	Bottle	1,848		
45	11040	Chlorpheniramine maleate	Α	Solid oral dosage form:4mg	Tablet	18		
46	11041	Chlorpheniramine maleate	Α	Oral liquid:2mg/5ml	Bottle	1,708		
47	11042	Chlorpheniramine maleate	Α	Injection: 10mg/ml in 1ml	Ampule	1,330		
48	11044	Dexamethasone	В	Injection: 4 mg/ml in 1ml	Ampule	1,610		
49	11045	Dexamethasone	D	Solid oral dosage form: 0.5mg	Tablet	130		
50	363095	Dexamethasone	D	Solid oral dosage form: 4mg	Tablet	130		
51	11046	Loratadine	С	Oral liquid: 5mg/5ml	Bottle	9,332		
52	11047	Loratadine	С	Solid oral dosage form: 10mg	Tablet	133		
53	11043	Desloratadine	S	Tablet: 5 mg film-coated	Tablet	395		
54	11035	Betametasone	D	Injection: 4mg/mL	Ampule	21,700		
4. AN	TIDOTES A	ND OTHER SUBSTANCES USED I	n poison	IING				
55	11048	Activated Charcoal	Α	Tablets or Powder: 50gm	Bottle	3,633		
56	363302	Magnesium Sulfate	С	Powder Salt: 5g	Bottle	3,713		
57	11049	Epinephrine (Adrenaline)	Α	Injection: 1mg in 1ml	Ampule	1,261		
58	12063	Acetylcysteine	С	Injection: 200mg/ml in 10ml	Ampule	18,600		
59	12064	Deferoxamine	D	Powder for Injection: 500mg (Mesylate)	Vial	5,760		
60	11051	Atropine Injection	Α	Injection: 1mg/ml in 1ml	Ampule	1,470		





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
61	11052	Calcium Gluconate	Α	Injection: 100mg/ml in 10ml	Ampule	9,800
62	363096	Dimercaprol	D	Injectable 50mg/mL in 2mL ampoule	Ampule	49,500
63	363097	D-penicillamine	D	Solid Oral Dosage Form: 250mg	Tablet	1,050
64	363098	Ethylenediaminetetra- acetic acid (EDTA)	D	Injection 200mg/mL in 5mL	Ampule	16,500
65	363099	Lipid emulsion	S	Solution 20%	Bottle	27,500
66	363100	Flumazenil	Α	Injection:100mcg/mL in 5mL	Ampule	44,000
67	363101	Succimer	D	Capsule 100mg (2,3- Dimercaptosuccinic acid)	Capsule	1,430
68	363102	Pralidoxime	S	Injection 600mg	Vial/Am pule	2,200
	TIEPILEPTI	CS AND MEDICICINES FOR MOOI	DISORD	ERS		
69	363103	Benzhexol	В	Solid oral dosage form: 5mg	Tablet	122
70	11060	Carbamazepine	Α	Solid oral dosage form: 200mg	Tablet	138
71	363104	Carbamazepine	Α	Solid oral dosage form: 100mg	Tablet	110
72	11062	Carbamazepine	Α	Oral liquid form:100mg/5ml	Bottle	23,190
73	11063	Chlorpromazine	Α	Solid oral dosage form: 25mg	Tablet	130
74	12065	Chlorpromazine	Α	Solid oral dosage form: 100mg	Tablet	157
75	11064	Chlorpromazine	Α	Injection 25mg/ml in 2ml	Ampule	2,213
76	11066	Clonazepam	D	Solid oral dosage form: 2mg	Tablet	910
77	11067	Clonazepam	D	Solid oral dosage form: 0.5mg	Tablet	504
78	363105	Donepezil	S	Solid oral dosage form: 5mg	Tablet	830
79	363106	Donepezil	S	Solid oral dosage form: 10mg	Tablet	1,050
80	11068	Diazepam	С	Solid oral dosage form: 5mg	Tablet	41
81	11069	Diazepam	Α	Injection: 5mg/ml in 2ml	Ampule	1,330
82	363107	Midazolam	D	Injection:5mg/ml	Ampule	13,260
83	363108	Midazolam	D	Injection:1mg/ml	Ampule	7,150
84	11070	Fluoxetine	S	Solid oral dosage form:20mg	Capsule	1,395
85	363109	Citalopram	D	Solid oral dosage form:20mg	Tablet	473
86	11071	Fluphenazine Decanoate	С	Injection: 25mg/ml in 1ml	Ampule	5,334
87	12066	Pregabalin	D	Solid oral dosage form:75mg	Tablet/C apsule	286
88	12067	Pregabalin	D	Solid oral dosage form:150mg	Tablet/C apsule	690
89	11074	Haloperidol	В	Solid oral dosage form:5mg	Tablet	73
90	363112	Haloperidol	В	Injection:5mg/ml in 1ml	Ampule	8,250
91	11075	Haloperidol	В	Solid oral dosage form:1.5mg	Tablet	63
92	363113	Lamotrigine	S	Solid oral dosage form: 100mg	Tablet	399
93	12253	Lamotrigine	S	Solid oral dosage form: 200mg	Tablet	500
94	11320	Olanzapine	S	Tablet 5mg	Tablet	574
95	11319	Olanzapine	S	Tablet: 10mg	Tablet	846





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
96	12213	Risperidone	S	Solid Oral dosage form: 1mg	Tablet	139
97	11325	Risperidone	S	Solid Oral dosage form: 2mg	Tablet	304
98	11076	Imipramine	С	Solid oral dosage form:25mg	Tablet	185
99	11077	Lorazepam	С	Solid oral dosage form: 1 mg	Tablet	416
100	11078	Lorazepam	С	Solid oral dosage form: 2mg	Tablet	494
101	363114	Lorazepam	С	Injection: 2mg/mL & 4mg/mL	Ampule	15,950
102	363115	Levetiracetam	S	Solid oral dosage form: 250mg	Tablet	550
103	363116	Levetiracetam	S	Solid oral dosage form: 500mg	Tablet	796
104	363117	Levetiracetam	S	Solid oral dosage form: 750mg	Tablet	1,650
105	363118	Levetiracetam	S	Solid oral dosage form: 1000mg	Tablet	2,200
106	363119	Levetiracetam	S	Injection 5mg/ml	Ampule	27,500
107	11079	Magnesium Sulfate	Α	Injection 50mg/mL in 10mL vial	Vial	6,199
6. AN	TI-INFECTI	VE MEDICINES	•		<u>'</u>	
6.1 Ar	ntihelminth	nics				
6.1.1	Intestinal .	Antihelminthics				
108	11081	Albendazole	Α	Solid oral dosage form: 200mg	Tablet	364
109	11082	Albendazole	Α	Solid oral dosage form: 400mg	Tablet	700
110	11083	Albendazole	Α	Oral liquid: 200mg/5ml in 30ml Bottle	Bottle	700
111	11086	Mebendazole	Α	Oral Liquid 100mg/5ml in 30ml	Bottle	1,225
112	11087	Mebendazole	Α	Solid oral dosage form: 100mg	Tablet	35
6.1.2	Anti-schist	cosomals and other anti-tremat	ode med	icines		
113	11091	Praziquantel	Α	Solid oral dosage form: 600mg	Tablet	396
6.2 Ar	ntibacteria	ls				
114	11123	Cefotaxime	D	Powder for Injection: 1g in vial	vial	3,055
115	11093	Chloramphenicol	В	Powder for Injection: 1g in vial	Vial	2,072
116	11094	Chloramphenicol	В	Injection oily: 1g in vial	Vial	2,072
117	11098	Ciprofloxacin	Α	Solid oral dosage form: 500mg	Tablet	82
118	363120	Ciprofloxacin	Α	Solid oral dosage form:250mg	Tablet	70
119	11155	Ciprofloxacin	С	Injection: 2mg/ml in 100ml	Vial	1,057
120	363121	Clarithromycin	С	Solid oral dosage form:250mg	Tablet	461
121	11099	Clarithromycin	С	Solid oral dosage form: 500mg	Tablet	1,281
122	11101	Clindamycin	S	Injection: 150mg/ml in 2ml	Vial	27,440
123	12068	Clindamycin	S	Solid oral dosage form: 150mg	Capsule	1,723
124	11699	Amoxycillin	Α	Dispersable oral dosage form: 250mg	Tablet	66
125	363122	Amoxycillin	Α	Dispersable oral dosage form: 125mg	Tablet	60
126	11696	Amoxycillin	Α	Solid oral dosage form: 250mg	Capsule	57
127	363123	Colistin methate Sodium	S	Powder for Injection 1MIU per vial	Vial	132,000





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
128	363124	Dapsone	S	Oral dosage form: 100mg	Tablet	1,380
129	363125	Amikacin		Injection: 500mg/2ml	Ampule	12,870
130	363126	Amoxycillin + Clavulanic Acid	В	Oral liquid:250mg+ 62.5 in 5ml as potassium salt	Bottle	6,793
131	12070	Amoxycillin + Clavulanic Acid	В	Powder for suspension: 200 mg + 28.5mg/5ml	Bottle	7,368
132	11106	Amoxycillin + Clavulanic Acid	В	Solid oral dosage form: 250mg + 125mg	Tablet	429
133	11107	Amoxycillin + Clavulanic Acid	В	Solid oral dosage form: 500mg +125mg	Tablet	447
134	11108	Amoxycillin + Clavulanic Acid	В	Powder for suspension: 125mg + 31.25mg/5ml	Bottle	7,000
135	11109	Amoxycillin + Clavulanic Acid	В	Injection: 600mg	Vial	2,470
136	11110	Amoxycillin + Clavulanic Acid	В	Injection: 1.2gm	Vial	6,927
137	363127	Ampicillin	Α	Injection:250mg	Vial	1,110
138	12071	Ampicillin	Α	Injection: 500mg	Vial	1,309
139	363128	Ampicillin + Sulbactam	С	Powder for injection (ampicillin 1g/sulbactam 0.5g)	Vial	7,150
140	363129	Ampicillin + Sulbactam	С	Powder for injection (ampicillin 2g/sulbactam 1g)	Vial	5,390
141	363130	Ampicillin + Sulbactam	С	Powder for injection (ampicillin 10g/sulbactam 5g)	Vial	12,650
142	11113	Ampicillin + Cloxacillin	В	Solid oral dosage form: 250mg + 250mg	Capsule	137
143	11114	Ampicillin + Cloxacillin	В	Injection:500mg	Vial	1,400
144	363131	Cefixime	S	Solid oral dosage form:200mg	Capsule	650
145	12072	Cefixime	S	Solid oral dosage form: 400mg	Capsule	1,209
146	11134	Cloxacillin	В	Powder for injection(as sodium salt) 250mg,500mg in 2ml vial	Vial	550
147	363132	Cefuroxime	D	Powder for Injection 250mg	Vial	2,750
148	363133	Cefuroxime	D	Powder for Injection 750mg	Vial	4,400
149	363134	Cefuroxime	D	Powder for Injection 1.5g	Vial	7,150
150	11130	Cefuroxime	D	Oral suspension 125mg/5mL	Bottle	11,676
151	363135	Cefuroxime	D	Oral suspension 250mg/5mL	Bottle	7,592
152	11128	Cefuroxime	D	Oral dosage form: 250mg	Tablet	700
153	363136	Cefuroxime	D	Oral dosage form: 500mg	Tablet	1,401
154	363137	Cefepime	S	Injection: 1000mg	Vial	24,200
155	363138	Ceftazidime	D	Powder for Injection: 250mg	Vial	6,600
156	11125	Ceftriaxone	B(A for STI)	Injection: 250 mg	Vial	1,120
157	11126	Ceftriaxone	B(A for STI)	Injection: 500 mg	Vial	1,120





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
158	11127	Ceftriaxone	B(A for STI)	Injection: 1gm	Vial	1,300
159	11131	Cefalexin	В	Solid oral dosage form: 250mg.	Capsule	109
160	11132	Cefalexin	В	Oral liquid form:125mg/5ml	Bottle	2,653
161	363139	Cefalexin	В	Powder for reconstitution:250mg/5 ml	Bottle	6,000
162	11137	Flucloxacillin	С	Oral liquid form:125mg/5ml	Bottle	5,950
163	11139	Flucloxacillin + Amoxicillin	С	Solid oral dosage form: 250mg + 250mg	Tablet/C apsule	503
164	11141	Meropenem	S	Injection:500mg	Vial	6,825
165	11142	Meropenem	S	Injection: 1gm	Vial	22,015
166	12073	Sulbactam + Ceftriaxone	D	Injection: 1.5gm	Vial	5,880
167	11144	Penicillin, benzathine benzyl	Α	Powder for Injection: 1.44 g (2,400,000 IU)	Vial	945
168	11145	Penicillin, benzyl (X-pen)	Α	Powder for Injection: 3g (5,000,000 IU)	Vial	938
169	11146	Penicillin, Phenoxy methyl (Pen V)	A	Solid oral dosage form: 250mg	Tablet	61
170	11147	Penicillin, Phenoxy methyl (Pen V)	A	Oral liquid liquid: 125mg/5ml	Bottle	2,926
171	11152	Azithromycin	B(A for STI)	Solid oral dosage form: 250mg	Tablet/C apsule	329
172	12074	Azithromycin		Solid oral dosage form: 500mg	Tablet/C apsule	841
173	11154	Azithromycin		Oral liquid form: 200mg/5ml	Bottle	3,255
174	11157	Sulphamethoxazole + Trimetoprim	A	Oral liquid 240mg/5ml	Bottle	1,330
175	11158	Sulphamethoxazole + Trimetoprim	A	Solid oral dosage form: 480mg	Tablet	40
176	11160	Doxycycline	A	Solid oral dosage form: 100mg	Tablet/C apsule	81
177	11172	Tetracycline	S	Oral dosage form: 250mg	Capsule	70
178	11167	Nitrofurantoin	Α	Solid oral dosage form: 100mg	Tablet	71
179	11161	Erythromycin	Α	Solid oral dosage form: 250mg	Tablet	88
180	11162	Erythromycin	Α	Oral liquid 125mg/5ml	Bottle	1,820
181	11163	Gentamycin	Α	Injection: 20mg/ml in 2ml	Ampule	277
182	11164	Gentamycin	Α	Injection: 40mg/ml in 2ml	Ampule	336
183	363141	Piperacillin + tazobactam	S	Powder for injection 2g + 250mg	Vial	15,600
184	12168	Piperacillin + tazobactam	S	Powder for injection 4g + 500mg	Vial	17,500
185	363142	Vancomycin	S	Oral dosage form: 125mg	Capsule	720
186	363143	Vancomycin	S	Oral dosage form: 250mg	Capsule	880
187	363144	Vancomycin	S	Injection form: 250mg	Vial	10,450
188	363145	Linezolid	S	Injection: 2mg/mL in 300mL	Bag	22,000





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
189	363146	Linezolid	S	Oral dosage form:600mg	Tablet	2,640
190	363147	Linezolid	S	Oral dosage form:400mg;	Tablet	2,200
191	363160	pyrimethamine	D	Solid oral dosage form:25mg	Tablet	2,200
192	363300	sulfadiazine	D	Solid oral dosage form:500mg	Tablet	3,000
193	11697	Tinidazole	Α	Solid oral dosage form: 500mg	Tablet	125
194	11190	Metronidazole	В	Injection: 5mg/ml in 100ml Bottle	Vial	715
195	11191	Metronidazole	Α	Oral liquid form: 200 mg/5ml	Bottle	1,400
196	11192	Metronidazole	Α	Solid oral dosage form: 200mg, 250mg	Tablet	25
197	11189	Ciproflaxin + Tinidazole	В	Solid oral dosage form: 500mg + 600mg	Tablet	500
198	363570	Clarythromycin+Tinidazole + Lansoprazole	В	Solid oral dosage form:500mg/500mg/30mg	Tablet	33,000
6.3 Ar	ntifungal m	nedicines				
199	11174	Amphotericin B	S	Powder for Injection :50mg	Vial	31,080
200	11175	Fluconazole	Α	Solid oral dosage form: 150mg	Capsule	429
201	363148	Fluconazole	Α	Solid oral dosage form: 200mg	Tablet	723
202	11176	Fluconazole	С	Injection: 2mg/ml in 100ml	Vial/Bot tle	2,870
203	363149	Flucytosine	S	Solid oral dosage form: 500mg	Tablet	1,380
204	363150	Flucytosine	S	Solid oral doage form: 250mg	Tablet	1,050
205	363151	Flucytosine	S	Injection:isotonic solution 1% flucytosine & 0.805% NaCl	Bottle	5,500
206	11177	Griseofulvin	Α	Solid oral dosage form: 500mg	Tablet	292
207	11178	Itraconazole	D	Solid oral dosage form: 100mg	Capsule	926
208	11183	Nystatin	Α	Oral liquid: 100,000 IU/ml	Bottle	1,925
209	11185	Terbinafine	С	Solid oral dosage form: 250mg	Tablet	1,215
210	11505	Terbinafine	С	Cream form: 1%	Tube	3,738
6.4 Ar	ntiviral me	dicines				
211	363152	Acyclovir	D	Injection: 500mg	Vial	22,000
212	12170	Acyclovir	В	Solid oral dosage form: 200mg	Tablet	141
213	11188	Acyclovir	В	Solid oral dosage form: 400mg	Tablet	336
214	363153	GancIclovir	S	Injection: 2mg	Ampule	15,000
215	363154	Valganciclovir	S	Solid oral dosage form:450mg	Tablet	55,000
216	363155	Entecavir	S	Solid oral dosage form:0.5mg	Tablet	5,500
217	363156	Ledipasvir	S	Solid oral dosage form:90mg	Tablet	38,500
218	363158	Ledipasvir/Sofosbuvir	S	Solid oral dosage form:90mg/400mg	Tablet	38,500
219	363159	Sofosbuvir	S	Solid oral dosage form:400mg	Tablet	50,000
6.5 Ar	ntimalarial	medicines				
220	12175	Artemether + Lumefantrine	Α	Solid oral dosage form: 20mg + 120mg	Pack/6	1,078





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
221	12177	Artemether + Lumefantrine	Α	Solid oral dosage form: 20mg + 120mg	Pack/12	1,260
222	12178	Artemether + Lumefantrine	Α	Solid oral dosage form: 20mg + 120mg	Pack/18	1,572
223	12176	Artemether + Lumefantrine	Α	Solid oral dosage form: 20mg + 120mg	Pack/24	1,883
224	363161	Artemether	В	Injection: 80mg/ml	Ampule	715
225	12076	Artesunate	Α	Injection: 60mg	Ampule	4,130
226	363162	Dihydroartemisinin + Piperaquine	С	Solid oral dosage form:20mg/160mg.	Tablet	6,396
227	11207	Dihydroartemisinin + Piperaquine	С	Solid oral dosage form: 40mg/320mg	Tablet	10,220
228	11213	Sulfadoxine + Pyrimethamine	А	Solid oral dosage form: 500mg+ 25mg	Tablet	610
7. AN	TINEOPLAS	STIC, IMMUNOSUPPRESSIVES ANI	D MEDICII	NES USED IN PALLIATIVE CARE		
7.1 AI	NTINEOPLA	ASTICS				
229	11217	5-Fluorouracil	S	Injection: 1gm	Vial/Am pule	16,297
230	11218	5-Fluorouracil	S	Injection :250mg	Vial/Am pule	1,376
231	11219	5-Fluorouracil	S	Injection:500mg	Vial/Am pule	5,264
232	363163	Azacitadine	S	Injection 25mg/mL	Vial/Am pule	44,000
233	11220	Actinomycin/Dactinomycin	S	Injection: 0.5mg(500mcg)	Vial/Am pule	33,297
234	363164	Antithymocyte globulin	S	Injection:25mg/ml in 5ml	Vial/Am pule	495,000
235	11223	Anastrazole	S	Solid oral dosage form: 1 mg	Tablet	1,430
236	363165	Infliximab	S	Injection 100mg	Vial/Am pule	2,035,000
237	363166	Bicalutamide.	S	Solid oral dosage form:150mg	Tablet/C apsule	17,740
238	11227	Bicalutamide	S	Solid oral dosage form:: 50mg	Tablet/C apsule	4,004
239	356285	Bevacizumab	S	Injection: 400mg	Vial	886,686
240	11226	Bevacizumab	S	Injection: 100mg	Vial	246,402
241	11702	Bevacizumab	S	Injection: 25mg/ml	Vial	50,000
242	363167	Alfuzocin	D	Solid oral dosage form: 10mg	Tablet	940
243	363168	Abiraterone	S	Solid oral dosage form:250mg	Tablet	13,750
244	363169	Bortezomib	S	Injection 3.5mg/vial	Vial/Am pule	239,250
245	11228	Bleomycin	S	Injection: 15IU	Vial/Am pule	39,585
246	363170	Calcium Folinate	S	Injection: 200 mg/mL	Vial/Am pule	49,500
247	12082	Calcium Folinate	S	Solid oral dosage form:15mg	Tablet/C	3,000





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
					apsule	
248	363171	Calcium Folinate	S	Injection:6mg	Vial/Am pule	2,200
249	11230	Capecitabine	S	Solid oral dosage form: 500mg	Tablet/C apsule	1,334
250	11231	Carboplatin	S	Injection: 450mg	Vial/Am pule	95,117
251	11232	Carboplatin	S	Injection: 150mg	Vial/Am pule	57,865
252	11233	Chlorambucil	S	Solid oral dosage form: 2mg	Tablet/C apsule	1,854
253	11234	Cisplatin	S	Injection: 50mg	Vial/Am pule	25,869
254	11235	Cisplatin	S	Injection: 10mg	Vial/Am pule	12,000
255	11236	Cyclophosphamide	S	Injection: 1gm	Vial/Am pule	7,000
256	11237	Cyclophosphamide	S	Injection: 500mg	Vial/Am pule	5,000
257	11238	Cyclophosphamide	S	Injection: 200mg	Vial/Am pule	3,000
258	11241	Dacarbazine	S	Injection: 200mg	Vial/Am pule	20,895
259	363172	Dacarbazine	S	Injection:100mg	Vial/Am pule	17,407
260	11242	Dacarbazine	S	Injection: 500mg	Vial/Am pule	25,887
261	363173	Docetaxel	S	Injection: 80mg	Vial/Am pule	41,803
262	11244	Docetaxel	S	Injection: 120mg	Vial/Am pule	116,076
263	11245	Doxorubicin	S	Injection: 10mg	Vial/Am pule	12,300
264	11246	Doxorubicin	S	Injection: 20mg	Vial/Am pule	15,170
265	11247	Doxorubicin	S	Injection: 50mg	Vial/Am pule	31,850
266	11249	Epirubicin	S	Powder for injection: 10mg	Vial	32,000
267	11248	Epirubicin		Powder for injection: 50mg	Vial	117,209
268	363174	Etoposide	S	Solid oral dosage form: 100mg	Capsule	8,250
269	363175	Etoposide	S	Injection: 50mg/5ml	Vial/Am pule	9,350
270	11251	Etoposide	S	Injection: 100mg/5ml	Vial/Am pule	18,992
271	363180	Imatinib	S	Solid oral dosage form:400mg	Tablet	4,470
272	11256	Gemcitabine	S	Injection: 1gm	Vial/Am pule	53,630
273	11257	Gemcitabine	S	Injection: 200mg	Vial/Am pule	21,983





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
274	363181	Gemcitabine	S	Injection: 500mg	Vial/Am pule	48,365
275	30377	Goserelin.	S	Injection: 10.8mg	Vial/Am pule	536,042
276	11258	Goserelin.	S	Injection: 3.6 mg	Vial/Am pule	279,387
277	11283	Zolendronic Acid	S	Injection:4mg	Vial/Am pule	84,240
278	363182	Zolendronic Acid	S	Injection:5mg	Vial/Am pule	121,000
279	11265	Methotrexate	S	Solid oral dosage form: 2.5mg	Tablet/C apsule	193
280	11267	Methotrexate	S	Injection: 50mg	Vial/Am pule	15,625
281	11269	Mitomycin-C	S	Injection: 10mg	Vial/Am pule	20,900
282	363183	Mitomycin-C	S	Injection:5mg	Vial	13,940
283	11272	Oxaliplatin	S	Injection: 50mg	Vial/Am pule	103,132
284	11273	Oxaliplatin	S	Injection: 100mg	Vial/Am pule	119,746
285	11274	Paclitaxel	S	Injection: 260mg	Vial/Am pule	280,808
286	11278	Rituximab	S	Injection: 500mg/ml	Vial/Am pule	768,446
287	11277	Rituximab	S	Injection: 100mg/ml	Vial/Am pule	254,121
288	363184	Hydroxychloroquine	S	Solid oral dosage form: 200mg	Tablet	660
289	11279	Trastuzumab	S	Injection:150mg	Vial/Am pule	694,330
290	30378	Trastuzumab	S	Injection:440mg	Vial/Am pule	939,120
291	363185	Trastuzumab	S	Injection sc: 600mg	Vial/Am pule	1,600,000
292	11280	Vinblastine	S	Injection: 10mg/10ml	Vial/Am pule	15,022
293	11282	Vincristine	S	Injection: 1mg/ml in 2ml	Vial/Am pule	4,626
294	363186	Vincristine	S	Injection: 1mg/ml in 5ml	Vial/Am pule	10,450
295	363187	Mesna	S	Solid oral dosage form: 400mg	Tablet	1,430
296	11264	Mesna	S	Injection, 100mg	Vial/Am pule	2,170
297	11260	Ifosfamide	S	Injection 1g	Vial/Am pule	27,391
298	11259	Hydroxyurea	S	Solid oral dosage form:500mg	Tablet/C apsule	524
7.2 lm	munosupp	ressant's and Immunostimulant	.s			
299	11285	Azathioprine	S	Solid oral dosage form: 50mg	Tablet/C	780





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
					apsule	
300	363188	Azathioprine	S	Solid oral dosage form: 75mg	Tablet/C apsule	1,100
301	363189	Azathioprine	S	Solid oral dosage form: 100mg	Tablet/C apsule	1,650
302	363190	Cyclosphorine	S	Injection: 50 mg/ml in 1ml	Vial/Am pule	22,000
303	11286	Cyclosphorine	S	Solid oral dosage form: 100mg	Tablet/C apsule	5,195
304	11287	Cyclosphorine	S	Solid oral dosage form: 50mg	Tablet/C apsule	1,300
305	11288	Cyclosphorine	S	Solid oral dosage form: 25mg	Tablet/C apsule	3,186
306	363191	Basiliximab	S	Injection 20mg	Vial/Am pule	4,950,000
307	11290	Erythropoietin	S	Injection: 2,000 IU	Ampule	17,354
308	11291	Erythropoietin	S	Injection: 4,000 IU	Ampule	19,950
309	11294	Filgrastim	S	Injection: 0.3mg	Vial/Am pule	64,487
310	11295	Mycophenolic acid	S	Solid oral dosage form: : 500mg	Tablet	2,892
311	363192	Mycophenolic acid	S	Solid oral dosage form: : 360mg	Tablet	1,740
312	363193	Sirolimus	S	Solid oral dosage form: 2mg	Tablet	6,416
313	11298	Sirolimus	S	Solid oral dosage form: 1mg	Tablet	5,880
314	11293	Everolimus	S	Solid oral dosage form: 0.25	Tablet	2,400
315	11292	Everolimus	S	Solid oral dosage form: 0.5mg	Tablet	5,209
316	363194	Tacrolimus	S	Solid oral dosage form: 0.5mg	Tablet/C apsule	975
317	11300	Tacrolimus	S	Solid oral dosage form: 1mg	Tablet/C apsule	1,264
318	363195	Tacrolimus	S	Solid oral dosage form: 2mg	Tablet/C apsule	6,600
319	363196	Tacrolimus	S	Ointment 0.1%	Tube	16,500
7.3 H	ormones, a	antihormones and medicines us		state		
320	11302	Tamoxifen	S	Solid oral dosage form: 20mg	Tablet	639
321	363197	Alfuzosine	D	Solid oral dosage form: 10mg	Tablet	990
322	11303	Tamsulosin hydrochloride.	D	Solid oral dosage form: 0.4mg	Capsule	478
7.4 M	edicines us	sed in palliative care				
323	11304	Amitriptyline- Hydrochloride	A	Solid oral dosage form: 25mg	Tablet	114
324	363198	Ondansetron	S	Solid oral dosage form: 8mg	Tablet	429
325	11306	Ondansetron	S	Injection: 2mg/ml in 2ml	Vial/Am pule	1,287
326	11307	Pethidine Hydrochloride	В	Injection: 50mg/ml	Vial/Am pule	1,429
8. AN	TIPARKINS	ONISM MEDICINES				





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
327	363199	Cabergoline	s	Solid oral dosage form: 0.5mg	Tablet/C apsule	2,750
328	11406	Levodopa + Carbidopa	D	Solid oral dosage form: 100mg + 25mg	Tablet	972
329	11408	Selegiline	S	Solid oral dosage form: 5mg	Tablet	230
9. ME	DICINES AF	FECTING BLOOD				
9.1 H	aematopoi	etic medicines				
330	11410	Ferrous (Sulphate/ fumarate)	А	Solid oral dosage form	Tablet/C apsule	42
331	11412	Ferrous salts	Α	Oral liquid:	Bottle	4,270
332	11411	Ferrous salts	Α	Solid oral dosage form	Tablet	39
333	363200	Iron	С	With vitamins & amino acids	Tablet/C apsule	250
334	363201	Calcium salts	С	With vitamins & amino acids	Tablet/C apsule	250
335	11414	Folic acid	Α	Solid oral dosage form: 5mg	Tablet	18
9.2 A	nticoagula	nt medicines				
336	363202	Low molecular weight Heparin	S	Injection:100mg/ml	Vial/Am pule	13,585
337	11417	Etamsylate	С	Solid oral dosage form: 500mg	Tablet	855
338	11418	Unfractionated Heparin Sodium	В	Injection: 1,000 IU/ml in 5ml	Vial/Am pule	8,400
339	11419	Protamine	В	Injection: 10mg/ml in 5ml	Vial/Am pule	26,400
340	12089	Streptokinase Infusion	S	Powder for injection: 1.5 millionIU	Vial/Am pule	102,000
341	12092	Alteplase	S	Powder for injection 50mg	Vial/Am pule	1,600,000
342	11420	Tranexamic acid	С	Solid oral dosage form: 500mg	Tablet	1,001
343	12094	Tranexamic acid	С	Injection: 500mg/ml	Vial/Am pule	2,651
344	363203	Tranexamic acid	С	Syrup 500mg/5ml in 300mls	Bottle	5,000
345	11422	Phytomenadione (Vitamin. K 1)	В	Injection: 0.5mg/ml in 2mg/ml in 2ml	Vial/Am pule	3,900
346	363204	Eltrombopag	S	Solid oral dosage form:25mg	Tablet	21,450
347	363205	Factor VIII concentrate	S	Factor VIII concentrate 500IU	Vial/Am pule	10,450
348	363206	Factor IX concentrate	S	Factor IX concentrate 500 IU	Vial/Am pule	10,450
349	363207	Warfarin	С	Solid oral dosage form: 1mg	Tablet	220
350	363208	Warfarin	С	Solid oral dosage form: 2mg	Tablet	280
351	11424	Warfarin	С	Solid oral dosage form: 5mg	Tablet	637
352	12186	Rivaroxaban	S	Solid oral dosage form:15mg	Tablet	5,340
353	363209	Rivaroxaban	S	Solid oral dosage form:20mg	Tablet	9,900
10. BI	OOD PROI	DUCTS AND PLASMA SUBSTITUT	ES			



No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
354	363210	Albumin	S	Infusion 25% 5%	Bottle	266,750
355	363211	Polygeline	S	Intravenous solution 3.5%, 500mL bottles	Bottle	13,750
356	363212	Iron Sucrose injection	S	Injection: 20mg/ ml	Bottle	5,500
11. C	ARDIOVASC	ULAR MEDICINES				
11.1	Antianginal	. medicines				
357	11004	Acetyl salicylic Acid	Α	Solid oral dosage form:100mg	Tablet	93
358	11428	Acetyl salicylic Acid	Α	Solid oral dosage form: 75mg	Tablet	85
359	363213	Acetyl salicylic Acid	S	Injection: 100mg/ml in 250ml	Ampule	2,000
360	363214	Nitroglycerin/glyceryl trinitrate	S	Injection: 50mg/ml in 250ml	Vial/Am pule	77,000
361	11432	Nitroglycerin/glyceryl trinitrate	S	Injection 25mg /250ml	Vial/Am pule	20,000
362	363215	Nitroglycerin/glyceryl trinitrate	С	Sublingual Spray; 400mcg	bottle	22,000
363	363320	Isosorbide dinitrate	С	Solid oral dosage form: 10mg	Tablet	150
364	363326	Isosorbide dinitrate	С	Solid oral dosage form: 20mg	Tablet	150
11.2	ntiarrhyth	mic medicines				
365	11433	Amiodarone	S	Solid oral dosage form: 100mg	Tablet	448
366	12100	Amiodarone	S	Injection:30mg/5ml	Ampule	3,000
367	11434	Diltiazem	D	Solid oral dosage form: 60mg	Tablet	200
368	12102	Adenosine	S	Injection: 3mg/ml in Saline	Vial/Am pule	1,029
369	11436	Verapamil	S	Injection:2.5mg/ml ,2ml	Vial/Am pule	15,000
370	363216	Verapamil	S	Solid oral dosage form:80mg	Tablet	200
371	11437	Verapamil	S	Solid oral dosage form: 40mg	Tablet	180
11.3	Antihyperte	ensive medicines				
372	11438	Amlodipine	С	Solid oral dosage form: 5mg	Tablet	71
373	11439	Amlodipine	С	Solid oral dosage form: 10mg	Tablet	101
374	363217	Esmolol	S	Injection: 10g/ml in 10ml	Vial/Am pule	20,240
375	11441	Amlodipine + Losartan	С	Solid oral dosage form: 5mg/10mg+50mg	Tablet	750
376	363218	Atenolol	В	Solid oral dosage form: 50mg	Tablet	46
377	363219	Sotalol	S	Solid oral dosage form: 80 mg	Tablet	1,650
378	363220	Sotalol	S	Solid oral dosage form: 160 mg	Tablet	3,080
379	363221	Sotalol	S	Solid oral dosage form: 240 mg	Tablet	3,300
380	363222	Sotalol	S	Solid oral dosage form: 120 mg	Tablet	1,870
381	363223	Sotalol	S	Injection 15mg/mL in 10ml	Vial/Am pule	38,500
382	12221	Bisoprolol	S	Solid oral dosage form: 5mg	Tablet	334
383	11446	Bisoprolol	S	Solid oral dosage form: 10mg	Tablet	477





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
384	11448	Candersatan Tabs	S	Solid oral dosage form: 16 MG	Tablet	563
385	11449	Candersatan Tabs	С	Solid oral dosage form: 8 MG	Tablet	325
386	12103	Candersatan + Hydrochlorothiazide	S	Solid oral dosage form: 16 MG + 12.5mg	Tablet	310
387	12194	Telmisartan	S	Solid oral dosage form: 40mg	Tablet	388
388	12195	Telmisartan	S	Solid oral dosage form: 80mg	Tablet	494
389	12196	Telmisartan + Hydrochlorothiazide	S	Solid oral dosage form: 80mg + 12.5mg	Tablet	494
390	363225	Telmisartan + Hydrochlorothiazide	S	Solid oral dosage form: 40mg+ 12.5mg	Tablet	400
391	11451	Captopril	В	Solid oral dosage form: 12.5mg	Tablet	120
392	11450	Captopril	В	Solid oral dosage form: 25mg	Tablet	127
393	12222	Carvedilol	С	Solid oral dosage form: 12.5mg	Tablet	197
394	12192	Carvedilol	С	Solid oral dosage form: 6.25mg	Tablet	194
395	363226	Clonidine	S	Solid oral dosage form:100mcg	Tablet	1,320
396	363227	Clonidine	S	Solid oral dosage form:200mcg	Tablet	1,650
397	363228	Clonidine	S	Solid oral dosage form:300mcg	Tablet	1,800
398	363229	Clonidine	S	Injection: 500mcg/ml in	Vial	27,800
399	363230	Phenylephrine	S	Injection: 10mg/ml	Vial/Am pule	93,500
400	363231	Noradrenaline	S	Injection:2mg/ml	Vial/Am pule	41,195
401	11456	Doxazocin	S	Solid oral dosage form: 2mg	Tablet	720
402	363232	Doxazocin	S	Solid oral dosage form: 4mg	Tablet	1,540
403	363233	Phenoxybenzamine	S	Solid oral dosage form: 10 mg	Tablet	1,100
404	363234	Enalapril	С	Solid oral dosage form: 2.5mg	Tablet	289
405	11458	Enalapril	С	Solid oral dosage form: 5mg	Tablet	403
406	11460	Hydralazine	В	Solid oral dosage form: 25mg	Tablet	175
407	11461	Hydralazine	В	Injection: 20mg/ml in 1ml	Ampule	5,180
408	11463	Hydrochlorthiazide + Losartan	С	Solid oral dosage form: 12.5mg + 50mg	Tablet	192
409	11469	Losartan Potassium	С	Solid oral dosage form: 50mg	Tablet	146
410	11465	Irbesartan	S	Tablet 150mg	Tablet	825
411	11464	Irbesartan	S	Tablet 300mg	Tablet	1,082
412	11466	Irbesartan + Hydrochlorothiazide	S	Solid oral dosage form: 150mg + 12.5mg	Tablet	1,330
413	363235	Irbesartan + Hydrochlorothiazide	S	Solid oral dosage form:300mg + 12.5mg	Tablet	1,547
414	12109	Metolazone	S	Tablet 5mg	Tablet	1,252
415	11470	Methyldopa	Α	Solid oral dosage form: 250mg	Tablet	159
416	12105	Labetalol	С	Solid oral dosage form: 100mg	Tablet	892
417	363236	Labetalol	С	Solid oral dosage form: 200mg	Tablet	1,400
418	12106	Labetalol	С	Injection 5mg/ml in 2ml or	Ampule	6,174





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
				10mg/ml in 2ml		
419	12197	Lisinopril	С	Tablet 5mg	Tablet	132
420	11467	Lisinopril	С	Tablet 10mg	Tablet	146
421	11471	Metoprolol	С	Solid oral dosage form: 50mg,	Tablet	520
422	12225	Metoprolol	S	Injection: 1mg/ml in 5 ml	Ampule	6,000
423	11472	Nifedipine	В	Solid oral dosage form: 10mg	Tablet	63
424	11473	Nifedipine	В	Solid oral dosage form: 20mg	Tablet	91
425	11477	Propranolol	Α	Solid oral dosage form: 40mg	Tablet	129
426	11474	Nimodipine	S	Solid oral dosage form: 30 mg	Capsule	902
427	363247	Sildenafil	S	Tablet; 50mg	Tablet	715
11.4 /	Medicines ι	ised in heart failure				
428	363237	Digoxin	D	Injection:250mg/ml	Ampule	1,430
429	11485	Digoxin	D	Solid oral dosage form: 0.25mg	Tablet	126
430	11455	Dopamine hydrochloride	S	Injection: 40mg/ml in 5ml	Vial/Am pule	10,800
431	355837	Ivabradine	S	Solid oral dosage form: 5mg	Tablet	486
432	11454	Dobutamine	S	Injection: 250mg	Ampule	13,440
11.5	Antithromb	otic medicines				
433	11487	Clopidogrel	D	Solid oral dosage form: 75mg	Tablet	183
434	363238	Prasugrel	S	Tablet 10mg	Tablet	1,105
435	363239	Ticagrelor	S	Solid oral dosage form: 60mg	Tablet	1,100
436	363240	Ticagrelor	S	Solid Oral dosage form: 90mg	Tablet	1,650
11.6 L	ipid-lower	ring agents				
437	11488	Atorvastatin	В	Solid oral dosage form: 10mg	Tablet	108
438	11489	Atorvastatin	В	Solid oral dosage form: 20mg	Tablet	117
439	363241	Atorvastatin	В	Solid oral dosage form: 40mg	Tablet	530
440	12111	Rosuvastatin	S	Solid oral dosage form: 10mg	Tablet	429
441	12199	Rosuvastatin	S	Solid oral dosage form: 20mg	Tablet	646
442	363242	Fenofibrate	D	Solid oral dosage form: 200mg	Capsule	1,050
12. DE	ERMATOLO	GICAL MEDICINES (topical)				
12.1	Antifungal	medicines				
443	11495	Clotrimazole	Α	Cream form: 1% in tube	Tube	735
444	363243	Clotrimazole	A	Pessary form: 500mg	Pessaries / pack of 1	1,193
445	11496	Clotrimazole	A	Pessary form: 100mg	Pessaries / pack of 6	1,147
446	11497	Clotrimazole	Α	Viginal cream form: 1% and 10%	Tube	1,750
447	11500	Miconazole	С	Oral gel: 2%	Tube	3,710
448	11501	Miconazole	С	Topical 2% Cream	Tube	2,034





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
449	11502	Miconazole	С	Vaginal cream form: 30gm	Tube	7,043
450	11503	Miconazole	С	Vaginal pessary : 400mg	Pack of 3's	7,000
451	11494	Clotrimazole + Hydrocortisone	Α	Gel or solution form:15gm	Tube	5,834
452	11507	Clotrimazole + Gentamycin/Neomycin + Betamethasone	С	Cream: 15gm	Tube	2,255
12.2	Anti-infect	ive medicines				
453	11506	Acyclovir	В	Topical Cream 5%	Tube	2,093
454	11510	Gentian Violet	Α	Solution 1%	Bottle	785
455	11512	Hydrogen Peroxide	A	Solution	1.5% & 3% solution	620
456	11511	Hydrogen Peroxide	A	Solution	6% solution	616
457	363244	Chlorhexidine gluconate	В	Solution	Tube/Bo ttle	3,713
458	363245	Mupirocin 2%	С	Topical Cream 15gm	Tube	5,430
459	11518	Oxytetracyline	Α	eye ointment 1%,3%	Tube	928
460	11520	Povidone lodine	Α	Ointiment/cream: 15gm	Tube	3,394
461	11521	Silver Nitrate Stick	С	Pencil	Stick	8,470
462	300707	Fusidic acid	С	Topical Cream 2%	Tube	6,100
463	11522	Silver Sulfadiazine	Α	Topical Cream 1%	Tube	1,506
12.3	Anti-inflam	matory and antipruritic medic	ines			
464	12200	Antihaemorrhoids suppository	В	Ointment or cream :	Tube	15,645
465	11527	Antihaemorrhoids suppository	В	Suppository:	Supposit ory	1,580
466	11529	Betamethasone	С	Ointment or Cream: 0.1% (as Valerate)	Tube	1,726
467	11532	Clobetasol	D	Ointment or Cream or Gel: 0.05% & 0.01%	Tube	2,999
468	11533	Diclofenac	Α	Gel:	Tube	1,853
469	11534	Diclofenac	Α	Rectal capsule: 100mg	rectal capsule	2,233
470	11535	Diclofenac	A	Rectal capsule: 50mg	rectal capsule	630
471	363246	Fludrocortisone	S	Solid oral dosage form: 0.1 mg	Tablet	1,380
472	11540	Mometasone furoate	S	Ointment/Cream :0.1%	Tube	13,706
473	11537	Hydrocortisone	Α	Cream or Gel 0.5	Tube	1,376
474	11544	Potassium Permanganate	Α	Solution: 1:4000 in 100 ml	Bottle	840
12.4	Medicines a	affecting skin differentiation a	nd prolife			
475	11548	Benzoic Acid Compound Ointment	A	3% salicyclic acid+6% benzoic acid Ointment:	Tube/Ja r	868





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
476	11549	Benzoyl peroxide Gel	Α	Topical solution: 5%	Tube	3,219
477	11550	Benzoyl peroxide Gel	Α	Topical solution: 2.5%	Tube	3,360
478	11551	Benzoyl peroxide Gel	Α	Topical solution: 10%	Tube	2,500
479	11552	Coal tar	С	Topical Solution: 5%	Bottle	2,475
480	11557	Podophyllin	D	Topical Solution: 10-25%	Bottle	40,978
481	11558	Salicylic acid	С	Topical solution: 5%	Bottle	990
482	363248	All-trans-retinoic acid (Tretinoin)	S	Solid oral dosage form: 10mg	Tablet	260
483	363249	All-trans-retinoic acid (Tretinoin)	S	Solid oral dosage form: 20mg	Tablet	2,260
484	363250	All-trans-retinoic acid (Tretinoin)	S	injection	Vial/Am pule	49,500
485	12120	Isotretinoin	S	Solid oral dosage form:20mg	Capsule	2,165
486	12119	Isotretinoin	S	Solid oral dosage form:10mg	Capsule	437
487	12121	Isotretinoin	S	Topical solution: 0.025% & 0.05%	Tube	9,800
488	11554	Extremponeous skin preparations	S	Cream/lotion/ointment	Tube/bo ttle	5,500
12.5		and pediculicides				
489	11562	Benzyl benzoate Emulsion	Α	Emulsion: 25%	Bottle	1,320
490	11563	Calamine	Α	Lotion: 100ml	Bottle	1,259
491	11564	Lindane	С	Lotion	Bottle	4,501
13. DI	URETICS A	ND VASOCONSTRICTORS				
492	11569	Acetazolamide	С	Solid Oral dosage form: 250 mg	Tablet	175
493	11462	Hydrochlorthiazide	D	Solid oral dosage form:25mg	Tablet	100
494	363310	Hydrochlorthiazide	D	Solid oral dosage form:12.5mg	Tablet	89
495	363251	Desmopressin	S	Injection 4mcg/ml	Vial	33,000
496	363252	Desmopressin	S	Oral dosage form: 0.2mg	Tablet	830
497	363253	Terlipressin	S	Injection: 0.12mg/mL	Vial/Am pule	49,500
498	11571	Bendrofluazide	Α	Solid Oral dosage form: 5mg	Tablet	65
499	11573	Furosemide	В	Injection: 10mg/ml in 2ml	Vial/Am pule	550
500	11574	Furosemide	В	Solid Oral dosage form: 40mg	Tablet	26
501	363254	Torsemide	S	Solid oral dosage form:2.5mg	Tablet	170
502	12123	Torsemide	S	Solid Oral dosage form: 5mg	Tablet	820
503	12124	Torsemide	S	Solid Oral dosage form: 10mg	Tablet	1,062
504	363255	Spironolactone	С	Solid oral dosage form:12.5mg	Tablet	86
505	11575	Spironolactone	С	Solid Oral dosage form: 25mg	Tablet	182
506	355809	Eplerenone	S	Solid oral dosage form: 25mg	Tablet	440
507	363313	Eplerenone	S	Solid oral dosage form: 50mg	Tablet	660
14. G	ASTROINTE	STINAL MEDICINES			·	



14.1 Antiulcer and Antacid medicines



No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
508	363314	Sodium citrate	D	Solution:0.3 Moles	Bottle	7,700
509	12230	Esomeprazole	S	Solid Oral dosage form: 40mg	Tablet	722
510	12231	Esomeprazole	S	Solid Oral dosage form: 20mg	Tablet	413
511	11577	Calcium Carbonate	S	Solid oral dosage form: 500mg	Tablet	114
512	11581	Lansoprazole	С	Solid Oral dosage form: 30mg	Tablet	182
513	12125	Octreotide	S	Injection: 50mcg	Vial/Am pule	59,900
514	12126	Octreotide	S	Injection: 100 mcg	Vial/Am pule	65,892
515	11576	Anti-acid liquid preparation	В	Liquid Oral dosage form	Bottle	2,002
516	11582	Magnesium Trisilicate and Aluminium Hydroxide	Α	Solid Oral dosage form: Compound mixture	Tablet	18
517	363256	Bismuth Subgallate	D	Solid oral Dosage form: 200mg	Tablet	990
518	363257	Mesalazine	S	Solid oral Dosage form: 400mg	Tablet	830
519	363258	Mesalazine	S	Solid oral Dosage form:500mg	Tablet	990
520	363259	Mesalazine	S	Solid oral Dosage form: 800mg	Tablet	1,540
521	11583	Omeprazole	Α	Solid Oral dosage form: 20mg	Capsule	59
522	11584	Pantoprozole	С	Solid Oral dosage form: 40mg	Tablet	193
523	11585	Pantoprozole	С	Injection: 40mg/ml	Vial/Am pule	6,230
14.2 /	Nedicines a	affecting intestinal secretion ar	nd antisp	asmodics		
524	12127	Ursodeoxycholic acid	S	Solid oral dosage form: 300mg	Tablet/C apsule	1,530
525	11606	Mebeverine Hcl	D	Solid oral dosage form: 135	Tablet	488
526	11012	Hyoscine butylbromide	С	Injection: 20 mg/ml in 1 ml	Vial	1,365
527	11013	Hyoscine butylbromide	Α	Solid oral dosage form:10mg	Tablet	143
528	12128	Cholestyramine	S	Powder form: 4g	Sachet	6,300
529	12202	Oxybutinin chloride	S	Solid oral dosage 5mg	Tablet	462
14.3	Intiemetic	medicines				
530	11591	Domperidone	D	Solid Oral dosage form: 10mg	Tablet	129
531	11599	Promethazine Hydrochloride	Α	Solid oral dosage form:25mg;	Tablet	35
532	11597	Promethazine Hydrochloride	Α	Injection: 25mg/ml in 2ml	Vial/Am pule	552
533	11598	Promethazine Hydrochloride	A	Oral liquid form: 5mg/5ml	Bottle	2,184
534	11593	Metoclopramide	С	Injection: 5mg/2ml	Vial/Am pule	693
535	11594	Metoclopramide	С	Solid Oral dosage form: 10mg	Tablet	116
536	11595	Metoclopramide	С	Oral liquid form: 1mg/5ml	Bottle	3,738
537	363569	Doxylamine succinate +Pyridoxine (B6)	В	Solid Oral dosage form: 25mg + 50mg	Tablet	320
14.4 L	axatives a	nd cathartics				
538	11601	Bisacodyl	Α	Solid Oral dosage form: 5mg	Tablet	82





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
539	11603	Lactulose	Α	3.1-3.5/5ml in 200ml	Bottle	9,338
540	363260	L-ornithine L-aspartate	S	Granules	Packet	5,500
541	363261	L-ornithine L-aspartate	S	Injection	Ampule	7,700
14.5 <i>l</i>	Medicines (used in diarrhoea				
542	11609	Zinc sulphate	Α	Solid oral dosage form:20mg	Tablet	64
543	11608	Loperamide	В	Solid Oral dosage form: 2mg	Tablet	97
15. H	ORMONES,	OTHER ENDOCRINE MEDICINES	AND CON	TRACEPTIVES		
15.1	Adrenal ho	rmones and synthetic substitut	es			
544	11610	Bromocriptine.	С	Solid Oral dosage form: 2.5mg	Tablet	623
545	11612	Clomiphene	С	Solid Oral dosage form: 50mg	Tablet	428
546	11614	Danazol	S	Solid oral dosage form:100mg	Capsule	1,200
547	11616	Finasteride	D	Solid Oral dosage form: 5 MG	Tablet	651
548	363262	Dutasteride	S	Solid oral dosage form:0.5mg	Tablet	1,093
549	363263	Methyl prednisolone	D	Oral dosage form: 4mg	Tablet	345
550	363264	Methyl prednisolone	D	Oral dosage form: 8mg	Tablet	440
551	363321	Methyl prednisolone	D	Powder for Injection :1000mg	Vial/Am pule	88,000
552	363322	Methyl prednisolone	D	Powder for injection: 40 mg/ml in 5mls	Vial/Am pule	11,000
553	11620	Misoprostol	Α	Solid Oral/Rectal dosage form: 200mcg	Tablet	1,155
554	363265	Metyrapone	S	Solid oral dosage form: 250mg	Tablet	2,200
555	11615	Dydrogestrone	S	Oral dosage form:10mg	Tablet	1,827
556	363266	Norethisterone	С	Solid oral dosage form: 5mg	Tablet	692
557	11626	Testosterone	S	Injection: 100mg/mL	Vial/Am pule	26,400
558	363315	Testosterone	S	Injection: 200mg/ml	Vial/Am pule	40,000
559	11622	Prednisolone	Α	Solid Oral dosage form: 5mg	Tablet	27
560	12134	Triamcinolone	S	Cream 1%	Tube	4,080
561	11627	Triamcinolone	S	Powder for Injection: 40mg/ml	Vial/Am pule	4,095
15.2 I	nsulins and	d other medicines used for diab	etes			
562	11632	Glibenclamide	Α	Solid Oral dosage form: 5mg	Tablet	55
563	363563	Gliclazide	Α	Solid Oral dosage form: 30mg	Tablet	200
564	363552	Gliclazide	Α	Solid Oral dosage form: 40mg	Tablet	200
565	363553	Gliclazide	Α	Solid Oral dosage form: 60mg	Tablet	200
566	11633	Gliclazide	Α	Solid Oral dosage form: 80mg	Tablet	226
567	11634	Glimepiride	С	Solid Oral dosage form: 1mg	Tablet	210
568	12203	Glimepiride	С	Solid Oral dosage form: 2mg	Tablet	225
569	11637	Glucagon	S	Powder for reconstitution: 10mg/ml	Vial	5,400





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
570	12137	Insulin	А	Insulin short acting: 100IU/ml	vial - 10mls	15,000
571	12234	Insulin	A	Insulin short acting: 100IU/ml	pen - 3mls	23,600
572	12205	Insulin	Α	Insulin Intermediate acting: 100IU/ml	vial - 10mls	12,000
573	12205	Insulin	A	Insulin Intermediate acting: 100IU/ml	pen - 3mls	20,000
574	363267	Insulin	A	Insulin long acting: 100IU/ml	vial - 10mls	12,000
575	363267	Insulin	A	Insulin long acting: 100IU/ml	pen - 3mls	20,000
576	363268	Insulin	S	Insulin pre mixed: 100IU/ml	vial - 10mls	12,000
577	363268	Insulin	S	Insulin pre mixed: 100IU/ml	pen - 3mls	20,000
578	11642	Metformin	Α	Solid Oral dosage form: 500mg	Tablet	47
579	363269	Metformin	Α	Solid Oral dosage form: 750mg	Tablet	111
580	11643	Metformin	Α	Solid Oral dosage form: 850mg	Tablet	146
581	363270	Metformin	Α	Solid Oral dosage form: 1,000mg	Tablet	255
582	363271	Pioglitazone	D	Solid oral dosage form: 15mg	Tablet	780
583	12235	Sitagliptin	S	Solid oral dosage form:50mg	Tablet	1,324
584	363272	Sitagliptin	S	Solid oral dosage form: 100mg	Tablet	1,800
585	363273	Empagliflozin	S	Tablet 10mg	Tablet	2,322
586	11646	Metformin + Glimipride	С	Solid oral dosage form: 500mg + 1mg	Tablet	450
587	11647	Metformin + Glimipride	С	Solid oral dosage form: 500mg + 2mg	Tablet	689
588	12237	Sitagliptin + Metformin	S	Solid oral dosage form: 50mg/1000mg	Tablet	1,517
589	12236	Sitagliptin + Metformin	S	Solid oral dosage form: 50mg/500mg	Tablet	1,300
590	11644	Metformin + Glibenclamide	Α	Solid oral dosage form: 500mg + 5mg	Tablet	317
15.3 7	Thyroid ho	rmones and antithyroid medicii	nes			
591	11651	Carbimazole	С	Solid Oral dosage form: 5mg	Tablet	200
592	11652	Pottasimum Iodide (Lugol's Solution)	В	Oral liquid	Bottle	4,000
593	363304	Propylthiouracil	S	Solid oral dosage form: 50mg	Tablet	2,500
594	363274	lodized oil	С	Injection	Vial/Am pule	3,520
595	363275	lodized oil capsules	А	Iodized oil capsules with nipple 240mg/0.5ml	Capsule	330
596	11653	Levothyroxine	D	Solid Oral dosage form: 50mcg	Tablet	195
16. I <i>N</i>	MUNOLOG	ICALS				
16.1 9	Sera and in	nmunoglobulins				





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price		
597	363276	Anti-D (Rho) Immunoglobulin	С	Injection:150mcg	Vial/Am pule	176,313		
598	11654	Anti-D (Rho) Immunoglobulin	С	Injection: 300 mcg	Vial/Am pule	188,500		
599	363278	Rabies immunoglobulin	A	Injection: 10,000IU/5ml	Vial/Am pule	30,498		
600	363279	Human Immunoglobulin G	S	Injection:	Vial/Am pule	715,000		
601	11656	Snake Venom Polyvalent Antiserum	А	Injection:	Vial/Am pule	367,250		
17. M	17. MUSCLE RELAXANTS (PERIPHERALLY-ACTING) AND CHOLINESTERASE INHIBITORS							
602	11660	Neostigmine	С	Injection: 2.5mg/ml in 1ml	Vial/Am pule	5,110		
603	363316	Neostigmine	С	Injection: 1mg/ml in 1ml	Ampule	4,940		
604	12210	Baclofen	S	Solid Oral Dosage Form; Tablet 10mg	Tablet	308		
605	11659	Ephedrine	В	Injection:30mg/ml	Ampule	14,785		
606	11661	Pancuronium Bromide	С	Injection: 4mg/ml in 2ml	Vial/Am pule	6,750		
607	363280	Tizanidine	S	Solid Oral Dosage Form: 2mg	Tablet/C apsule	592		
608	12211	Tizanidine	S	Solid Oral Dosage Form: 4mg	Tablet/C apsule	779		
18. 0	PHTHALMC	LOGICAL PREPARATIONS						
18.1	Anti-infect	ive agents						
609	11664	Acyclovir Eye ointment	С	Ointment: 3%	Tube	4,648		
610	363560	Ganciclovir	S	Ophthalmic gel, 0.15%	Tube	19,800		
611	11667	Chloramphenicol Ear/Eye drops	Α	Solution:!).5% in 10ml	Bottle	1,260		
612	11668	Chloramphenicol Eye Ointment	Α	Ointment: 1%	Tube	784		
613	11669	Ciprofloxacin eye/ drops	С	Solution: 0.3%	Bottle	1,386		
614	12238	Dexamethasone + Chloramphenical	С	eye drops: 0.5%,1%	Bottle	2,065		
615	11671	Dexamethasone + Gentamycin eye/ear drops	С	Solutions: 0.5%,1%	Bottle	2,884		
616	11672	Dexamethasone + Neomycin Ear/Eye Drops	С	Solution: 0.1%+ 0.35%	Bottle	1,190		
617	363318	Chlorhexidine	S	Drops: 0.2%	Bottle	7,700		
618	11498	Econazole	S	Drops: 5%	Bottle	3,080		
619	363311	Natamycin	S	Drops: 5%	Bottle	14,300		
620	363317	Ofloxacin	D	Drops: 0.3%	Bottle	1,591		
18.2	18.2 Anti-inflammatory agents							
621	11679	Dexamethasone Eye	D	Solution: 0.1%	Bottle	1,274		
622	11683	Prednisolone Eye Drops	D	Solutions: 0.5%/1%	Bottle	2,982		
623	12142	Latanoprost	D	Solution: Drops 0.05%	Bottle	18,760		





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
624	12144	Bimatoprost	D	Solution: Drops 0.03%	Bottle	5,000
625	12145	Tropicamide	S	Solution: Drops 0.5%, 1%	Bottle	9,900
626	12146	Tropicamide +Phenylephrine	С	Solution: Drops 0.8% + 5%	Bottle	15,400
627	363281	Tropicamide + Cyclopentolate	С	Drops 0.5% + 1%	Bottle	2,300
628	11360	Hydroxypropylmethylcellulo se	С	Drops:(0.70) 10ml/15ml	Bottle	11,060
629	11692	Sodium cromoglycate	С	Eye drops:2%-4%	Bottle	2,800
18.3 L	ocal anae	sthetics				
630	40127	Tetracaine	С	Eye drops 0.5%, 1%	Bottle	650
18.4 <i>N</i>	Niotics and	antiglaucoma medicines and o	ther ocu	lar preparation		
631	11685	Atropine Eye drops	В	Solution: 0.5%,1% in 10ml	Bottle	8,568
632	363282	Atropine	В	Ointment: 1%	Tube	7,956
633	11686	Cyclopentolate Eye drops	С	Solutions.1%,5%	Bottle	2,170
634	11691	Pilocarpine Eye Drops	С	Solution:2%, 4%	Bottle	4,501
635	363561	Oxymetazoline	С	Eye drops 0.025%	Bottle	1,885
636	11693	Timolol Eye Drops	С	Solution: 0.25% and 0.5% in 5ml	Bottle	2,835
637	363283	Betaxolol	D	Drops 0.25%, 0.5%	Bottle	15,000
638	363284	Brimonidine	D	Drops 0.15%, 0.2%	Bottle	18,000
639	363303	5 -Fluoro Uracil	D	1% eye drops	Bottle	4,880
640	363312	Dorzolamide	S	Drops: 20 mg/ml	Bottle	15,912
641	11690	Local compounded Ophthalmic preparations	S	Ointment &Solutions	Bottle	4,500
19. 0	XYTOCICS A	AND ANTIOXYTOCICS				
19.1 (Oxytocics					
642	11309	Ergometrine	С	Injection: 0.5mg/ml in 1ml	Vial/Am pule	1,316
643	363305	Dicyclomine	В	Tablet 20mg	Tablet	325
644	363562	Dicyclomine	В	Injection: 10mg/ml in 2ml	Vial/Am pule	7,150
645	11312	Oxytocin	S	Injection 10IU in 1ml	Vial/Am pule	1,505
20. Al	VTI-MIGRAI					
646	12150	Ergotamine tartate	С	Solid oral dosage form:1mg, 2mg	Tablet	882
21. MEDICINES FOR MENTAL AND BEHAVIOURAL DISORDERS						
21.1	21.1 Anticonvulsants					
647	11313	Phenobarbital	A	Injection: 100mg in 2ml	Vial/Am pule	4,725
648	11315	Phenobarbital	Α	Solid Oral dosage form: 30mg	Tablet	42
649	11316	Phenobarbital	Α	Solid Oral dosage form: 100mg	Tablet	140
650	11317	Phenytoin	С	Solid Oral dosage form: 100 mg.	Tablet/C apsule	133





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
651	11318	Phenytoin	С	Solid Oral dosage form: 50mg	Tablet	67
652	363286	Phenytoin	С	Liquid Oral Suspension: 30mg/5ml	Bottle	14,300
653	12212	Phenytoin	С	Injection 100mg/2mL	Vial/Am pule	23,100
21.2	Nedicines (used in mood disorders				
654	11322	Sodium Valproate	С	Solid Oral dosage form: 500mg	Tablet	650
655	11324	Sodium Valproate	С	Solid Oral dosage form: 200mg	Tablet	280
22. M	EDICINES A	CTING ON THE RESPIRATORY T	RACT			
656	11330	Budenoside Inhalation	В	Aerosol: 100mcg per dose	Bottle	24,913
657	11337	Budenoside Inhalation	В	Aerosol: 200mcg per dose	Bottle	28,795
658	11338	Hydrocortisone	Α	Powder for Injection: 100mg/ml	Vial	1,348
659	11339	Ipratropium	S	Aerosol: 20mcg/dose	Bottle	18,998
660	11340	Ipratropium	S	Solution for nebulizer: 250- 500mcg/ml	Bottle	990
661	11345	Montelukast	D	Solid Oral dosage form: 10MG	Tablet	466
662	11344	Montelukast	D	Solid Oral dosage form: 5MG	Tablet	377
663	12242	Cough Mixture	Α	Syrup: 100ml	Bottle	2,184
664	11346	Salbutamol	Α	Solid Oral dosage form: 4mg	Tablet	21
665	11347	Salbutamol	Α	Syrup: 2mg/5ml	Bottle	1,260
666	11348	Salbutamol	В	Injection: 0.5mg/ml	Vial/Am pule	2,058
667	11350	Salbutamol	A	Aerosol: 100 mcg , 200 mcg per dose	Bottle	6,720
668	363306	Tiotropium	S	Inhalation1.25mcg/actuation, 2.5mcg/actuation	Vial/Bot tle	38,500
669	12244	Fluticasone	D	Aerosol:50mcg	Bottle	28,809
670	363572	Salmetrol + Fluticasone	D	Aerosol: 25mcg+250mcg	Bottle	18,122
671	12245	Salmetrol + Fluticasone	D	Aerosol: 25mcg+125mcg	Bottle	12,480
672	12246	Salmetrol + Fluticasone	D	Aerosol: 25mcg+50mcg	Bottle	7,000
23. SC	DLUTIONS (CORRECTING WATER, ELECTRO	LYTE AND	ACID-BASE		
23.1 (Oral					
673	11352	Oral Rehydration Salts (O.R.S)	A	Powder for Solution:	Sachet	228
674	11354	Potassium chloride (slow release)	С	Solid Oral dosage form: 600mg	Tablet	470
23.2 F	Parenteral					
675	11355	Calcium Chloride Injection	D	Intravenous Injection: 10mcg/ml	Vial/Am pule	2,800
676	11361	Dextrose IV Solution	С	Intravenous Injection: 10% in 500ml	Bottle	2,380
677	11362	Dextrose IV Solution	A	Intravenous Injection: 5% in 500ml	Bottle	1,218
678	11363	Dextrose IV Solution	Α	Intravenous Injection: 5% in	Bottle	2,240





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
				1000ml		
679	11364	Dextrose infusion	С	Intravenous Injection: 25% in 100ml	Bottle	6,000
680	363287	Dextrose infusion	С	Intravenous Injection: 25% in 50ml	Bottle	5,950
681	363288	Dextrose infusion	С	Intravenous Injection: 50% in 50ml	Bottle	5,967
682	363289	Dextrose infusion	С	Intravenous Injection: 50% in 100ml	Bottle	6,000
683	11365	Mannitol IV solution	С	Intravenous Injection: 20% in 100ml	Bottle	7,700
684	11366	Mannitol IV solution	С	Intravenous Injection: 10% in 500ml	Bottle	6,283
685	300650	Polystyrene sulfonate	D	Oral dosage form: 15gm	Sachet	9,350
686	11055	Sodium bicarbonate	С	Injection: 5%	Bottle	1,680
687	11367	Potassium Chloride Concentrated IV Solution	С	Intravenous Injection: 7.4%, 8.4%	Bottle	12,600
688	11368	Sodium Chloride IV Solution (NS)	A	Intravenous Injection: 0.9%, 500ml	Bottle	1,246
689	11369	Sodium Chloride IV Solution (NS)	A	Intravenous Injection: 0.9%, 1000ml	Bottle	2,660
690	11370	Sodium Chloride IV Solution (NS)	С	Intravenous Injection: 0.3%, 500ml	Bottle	1,225
691	363309	Sodium Chloride IV Solution (NS)	С	Intravenous Injection: 0.3%, 1000ml	Bottle	2,600
692	363308	Sodium Chloride + Dextrose IV Solution (DNS)	В	Intravenous Injection: 0.3%, 500ml	Bottle	1,213
693	11371	Sodium Chloride + Dextrose IV Solution (DNS)	В	Intravenous Injection: 0.3%, 1000ml	Bottle	1,430
694	11372	Sodium Lactate Compound IV Solution (Hartmann's/Ringers Lactate)	В	Intravenous Injection: 500ml	Bottle	1,138
695	11373	Sodium Lactate Compound IV Solution (Hartmann's/Ringers Lactate)	В	Intravenous Injection: 1000ml	Bottle	2,240
23.3 /	Miscellaned	ous				
696	11374	Water for injection	А	Injection: 10ml amp	Vial/Am pule	159
24. VI	TAMINS AN	ND MINERALS				
697	12250	Hydroxocobalamin (Vitamin B12)	С	Injection: lmg/ml in 1ml	Vial/Am pule	1,646
698	363323	Retinol (Vitamin A) Capsules	A	Solid Oral dosage form: 200,000IU	Capsule	220
699	363324	Retinol (Vitamin A) Capsules	A	Solid Oral dosage form: 100,000IU	Capsule	200
700	363325	Retinol (Vitamin A) Capsules	Α	Solid Oral dosage form: 50,000 IU	Capsule	127





No.	Item Code	Product Description	Level	Strengths, Formulation	Unit of Measure	Unit Price
701	11386	Vitamin B complex	В	Oral solution:(contains nicotinamide,riboflavin,thiamine)	Bottle	1,288
702	11387	Vitamin B complex	В	Solid Oral dosage form: B1 to B12(nicotinamide, riboflavin, thia mine)	Tablet	20
703	11388	Vitamin B complex	В	Injection: 10mg(contain pontothenol ,pyridoxine,riboflavine,thiamine) /ml	Vial/Am pule	1,701
704	11389	Thiamine (Vitamin B1)	С	Injection: 100mg/ml in 1ml	Vial/Am pule	10,200
705	363290	Thiamine (Vitamin B1)	С	Solid Oral dosage form: 100mg	Tablet	277
706	122311	Glucosamine +Chondrotin sulphate	S	Solid oral dosage form:	Tablet	530
707	11391	Nicotinamide (Vitamin B3)	С	Solid Oral dosage form: 50mg	Tablet	119
708	11392	Pyridoxine (Vitamin B6)	В	Solid Oral dosage form: 25mg	Tablet	312
709	11394	Ascorbic Acid (Vitamin C)	Α	Solid Oral dosage form: 500mg,100mg	Tablet	130
710	12153	Ergocalciferol (Vitamins D)	С	Solid oral dosage form: 1.25mg (50, 000IU)	Capsule	203
711	363291	Ergocalciferol (Vitamins D)	С	Oral solution: 0.25mg/mL (10,000IU/mL)	Bottle	400
712	363573	Vitamin B1, B6, B12	В	Solid Oral dosage form:	Capsule	150
713	363571	Vitamins + Minerals	С	Solid Oral dosage form:	Capsule	370
25. E	AR, NOSE A	ND THROAT CONDITIONS				
714	363292	Sodium chloride	Α	Normal saline nasal spray/drop	Bottle	2,275
715	11687	Ephedrine Nasal Drops	В	Solutions.5%,1% in 10mls	Bottle	2,030
716	11678	Betamethasone	В	Ear drops & Eye 0.1%	Bottle	686
717	11399	Boric acid	Α	Ear drop; 3%	Bottle	1,078
718	11400	Clotrimazole	Α	Ear drops; 1%	Bottle	5,950
719	11398	Lidocaine + Beclometasone + Clotrimazole + Chloramphenicol	D	Ear drop	Bottle	6,720
720	12243	Mometasone	S	Nasal spray 50 micrograms/dose (as furoate)	Bottle	32,228
721	363293	Xylometazoline	S	Nasal spray 0.05%	Bottle	3,259





LIST OF MEDICAL CONSUMAMBLES

No.	Item Code	Product Description	Price
1	12032	Bandage Plaster of Paris 7.5 cm 2.7 cm	1,550
2	12157	EMG needle	50,000
3	12038	Cannula	1,040
4	12018	Urine Colletion Bag for Adults 2000 cc	1,950
5	12021	Tube Nasal Feeding CH14	1,950
6	12020	Tube Nasal Feeding CH5	1,950
7	12019	Tube Nasal Feeding CH8	1,950
8	12013	Blood Giving Set	1,300
9	12252	Polypropylene Mesh(any size) Any size	185,900
10	12031	Bandage Plaster of Paris 15 cm 2.7 cm	1,620
11	12023	Bandage Crepe	1,950
12	12014	I.V Giving Set	650
13	12041	Inhaler masks (Baby mask) & Spancer	15,000
14	12048	Glucostic Strips for Sugar Monitoring, each strip each	850
15	12040	Traction kit	25,000
16	12039	Catheter	2,600
17	12156	Colostomy bag	2,000



ANNEX III PROCEDURES AND SURGICAL SERVICES



Mueno

	Price Schedule for Minor Procedures				
S/n	Item Code	Item Name	Price		
1	41106	Amputation of digits / Interphallangeal Joints Disarticulation	100,000		
2	41095	Amputation Stump Revision Soft Tissue	100,000		
3	41096	Amputation Stump Revision Soft Tissue & Bone	100,000		
4	41103	Amputation/Disarticulation of Phallanges (One/two)	100,000		
5	41003	Anal Dilatation (Lord's Manoeuvre)	100,000		
6	41034	Apicectomy	60,000		
7	41004	Band Ligation (Hemorrhoids)	184,000		
8	43203	Bartholin's Cyst/Abscess Marsupialization	100,000		
9	41093	Bilateral Tubal Ligation (BTL)	35,000		
10	43204	Bone Marrow Aspiration Biopsy	70,000		
11	6208	Bronchoscopic Biopsy & Brush Cytology	120,000		
12	41100	Carpal Tunnel Syndrome (CTS) Decompression	100,000		
13	41009	Cauterization of warts or bleeding vessels (Electrical)	140,000		
14	41010	Cervical Circlage (Shrodkar /McDonalds)	150,000		
15	41013	Cervical Tear Repair (Extensive)	100,000		
16	41014	Chalazion Excision	50,000		
17	41016	Circumcision (Child)	50,000		
18	41019	Cone Biopsy	50,000		
19	41020	Conjunctival Mass Excisional Biopsy	100,000		
20	41021	Corneal/Scleral Foreign Body Removal under GA	100,000		
21	41024	Cystoscopy	100,000		
22	41027	Dental Tumour/ Cyst Excision under LA	150,000		
23	41028	Dermoid Cyst Excision (Eye)	120,000		
24	43209	Dilatation and curettage (D&C)	100,000		
25	41032	Endoscopic Biopsy	120,000		
26	41036	Esophageal Stenting (with stent (s))	300,000		
27	41035	Esophagoscopy & Dilatation	200,000		
28	41037	EUA and Wedge Biopsy-Cervix	100,000		
29	41101	Evacuation Of Spinal Haematoma	100,000		
30	41039	Excision of Benign Vulval Tumor	80,000		
31	41102	Excision Of Neuroma	80,000		
32	41040	Excisional Biopsy under LA	80,000		
33	41041	Extraction of Complex Tooth/disimpaction	20,000		
34	41042	Eye Excisional Biopsy	100,000		
35	41044	Fissurectomy	150,000		
36	41045	Fistulectomy	150,000		





		Price Schedule for Minor Procedures	
S/n	Item Code	Item Name	Price
37	41046	Flap Excision (Dental)	35,000
38	41047	Gingivectomy Each Tooth	40,000
39	41091	Haemorrhoidectomy	150,000
40	41049	I&D (Dental Abscess)	100,000
41	41105	In Growing Toe/Nail Excision - Foot	35,000
42	41094	Incision & Drainage Under LA (Simple Abscess)	35,000
43	41053	Incisional Biopsy	50,000
44	41055	Intermaxillary Fixation	100,000
45	41056	Intraossious Puncture	30,500
46	41058	Kidney Biopsy	100,000
47	41059	Laparoscopy & Dye insufflation	200,000
48	41061	Lid Rotation (TRP)	160,000
49	41062	Lipoma Excision Major	80,000
50	41063	Lipoma Excision Minor	80,000
51	41064	Liver Biopsy	100,000
52	41060	Loop Electrosurgical Excision Procedure (LEEP)	100,000
53	41065	Lymph Node Biopsy	80,000
54	41068	Manual Vaccuum Aspiration (MVA) for incomplete abortion/Evacuation	80,000
55	41067	Meatotomy	80,000
56	41069	Perineal Repair (Old Unrepaired Tears)	80,000
57	41115	Plantar Fasciotomy Open - Foot	100,000
58	41116	Plantar Fasciotomy Percutaneous - Foot	100,000
59	41070	Pleural Biopsy	60,000
60	41073	Polypectomy-Cervical	150,000
61	41072	Polypectomy-Nasal	150,000
62	41075	Pterygium Excision with or without conjuctival graft	50,000
63	41031	Pulpotomy	45,000
64	41076	Rectal Biopsy	100,000
65	41077	Sclerotherapy for keloid/varicose veins	100,000
66	41113	Sequestrectomy /Osteomyelitis Saucerization (Simple)	150,000
67	41078	Simple Cervical Tear Repair	100,000
68	41079	Skin Biopsy	85,000
69	6286	Skull Traction	100,000
70	41081	Sloughectomy	100,000
71	41083	Suction and Curretage for Molar Pregnancy	100,000
72	6293	Suprapubic Cystotomy - SPC	100,000
73	6315	Surgical Toilet + Suture	100,000
74	41086	Tarsorrhaphy	80,000





	Price Schedule for Minor Procedures					
S/n	Item Code	Item Name	Price			
75	41088	Third Degree Vaginal Tear repair	50,000			
76	6457	Tongue Tie release (Frenulectomy)	20,000			
77	41089	Underwater Seal Drainage	150,000			
78	41090	Wide Excision (Ulcer/Tumor/Lipoma/Lymph node biopsy/Keloid/ Excisional Biopsy) under GA	80,000			
79	6157	Wound Dressing (Out Patient) Stitch removal	5,000			



	Price Schedule for Ordinary Procedures					
S/	Item	Item Name	Price			
<u>n</u>	Code 6278	Above Elbow POP (Adult)	16,000			
2	6149	Above Elbow POP (Addit) Above Elbow POP (Children)	10,000			
3	6137	Above Knee POP (Adult)	16,000			
4	6150	Above Knee POP (Children)	10,000			
5	6102	Ascitic Fluid Tapping	30,000			
6	6133	Aural Tolilet (per one ear)	20,000			
7	6138	Below Elbow POP (Adult)	12,000			
8	6151	Below Elbow POP (Addit) Below Elbow POP (Children)	10,000			
9	6139	Below Knee POP (Adult)	12,000			
10	6152	Below Knee POP (Addit) Below Knee POP (Children)	10,000			
11	6569	Blood transfusion	10,000			
12	6140	Closed Reduction Dislocation/Fracture	70,000			
13	6531	Closed Urinary Drainage System	20,000			
14	6153	Club Foot POP (Children)	10,000			
15	6142	Contact POP (Adult)	12,000			
16	6154	Contact POP (Children)	10,000			
17	6532	Cricothyrotomy	80,000			
18	6104	Cut down	50,000			
19	6143	Cylinder POP (Adult)	12,000			
20	6155	Cylinder POP (Children)	10,000			
21	6144	Distal Humeral Fracture POP (Adult)	30,000			
22	6495	Ear Wax Removal	10,000			
23	6107	Extraction-Deciduous Tooth	14,000			
24	6108	Extraction-Permanent Tooth	20,000			
25	6230	Fistula or Canal Probing	100,000			
26	6109	Foreign Body Removal (Conjuctival)	10,000			
27	6110	Foreign Body Removal (Interstistial) Eye	80,000			
28	6240	Insertion and removal of implant	50,000			
29	6112	Keloid Infiltration	20,000			
30	6113	Lumbar Puncture	10,000			
31	6335	Major Wound Dressing (Diabetic/ Extensive Bed sores/ Pyomyositis, extensive Burn & Cancerous wound etc)	20,000			
32	6114	Manual Removal of Placenta	10,000			
33	6529	Nasal packing	20,000			
34	6528	Otoscopy done by ENT Surgeon using Endoscope	20,000			
35	6119	Pleural Fluid Tapping	20,000			





36	6524	Proctoscopy Flexible	80,000
37	6120	Proctoscopy, EUA, Biopsy (Rigid scope)	80,000
38	6122	Removal Of Foreign Body - Ear	30,000
39	6123	Removal Of Foreign Body - Nose under GA	100,000
40	6121	Removal Of Foreign Body - Nose under LA	30,000
41	6146	Sarmieto POP (Adult)	12,000
42	6156	Sarmieto POP (Children)	10,000
43	6147	Skeletal Traction (Adult)	50,000
44	6148	Skeletal Traction (Child)	40,000
45	6125	Skin curretage	30,000
46	6526	Suturing at OPD	10,000
47	42064	Kelloid Excission-Major	250,000



		Price Schedule for Specialized Procedures	
S/n	Item Code	Item Name	Price
1	6522	Fixed Orthodontic appliance fixing per jaw (procedure and material)	275,000
2	6521	Full Denture per whole mouth (from 14 teeth and above, issued once in a life time)	300,000
3	6562	Band ligation for oesophageal varices	215,000
4	6205	Biopsy - Prostate Trucut	100,000
5	6206	Biventricular Device Interrogation	25,000
6	6207	Bleeding socket/Dry Socket Treatment	15,000
7	6563	Bronchoscopic Stenting	250,000
8	6340	Central line insertion	100,000
9	6567	Chemotherapy Administration	20,000
10	6564	Colonoscopy Flexible with Biopsy	160,000
11	6565	Colonoscopy Flexible without Biopsy	160,000
12	43007	Cryotherapy (of Eye,Cervix,Skin etc)	75,000
13	6487	CT Simulation, Moulding and Planning	200,000
14	6212	Delayed Speech & Language Management (per session)	20,000
15	6503	Dental scaling + polishing (Whole mouth)	30,000
16	6215	Direct Laryngoscopy +/- Biopsy	100,000
17	6220	Endodontic Treatment - Anterior Tooth (per visit/session)	30,000
18	6221	Endodontic Treatment - Molar (per visit/session)	50,000
19	6222	Endodontic Treatment - Premolar (per visit/session)	40,000
20	43146	Endoscopic Retrograde Cholangiopancreatography (ERCP)/Sphincterotomy	350,000
21	6228	Fibre Optic Nasolaryngoscopy	100,000
22	6523	Floride Vanish application per tooth	20,000
23	6509	Fundoscopy done by Opthalmologist using Slit Lamp	20,000
24	6285	Interventional Procedures(Vascular)	100,000
25	6505	Intra Articular/intra lessional Triamcinolone Injection	25,000
26	6506	Laryngoscopy(Direct/Indirect)	100,000
27	6242	Laser Capsulotomy	30,000
28	6243	Laser Focal Photocoagulation	60,000
29	6244	Laser Pan Retino Photocoagulation	100,000
30	6245	Laser Trabeculoplasty	150,000
31	6256	Pericardiocentesis	100,000
32	6510	Reduction of Temporomandibular Joint (TMJ)	40,000
33	6264	Removal of Foreign Body Under GA (Broncoscopy)	150,000
34	6511	Sigmoidoscopy/Rectoscopy with Biopsy (Rigid/Flexible)	100,000
35	6512	Sigmoidoscopy/Rectoscopy without Biopsy (Rigid/Flexible)	100,000
36	6267	Splinting of Teeth per quadrant	25,000





37	6268	Subdural tapping	25,000
38	6271	Tooth Extraction - Complex	20,000
39	6515	Tooth Filling Permanent	40,000
40	6517	Tooth Filling Temporary	20,000
41	6518	Tooth Filling With Pin Additional-Anterior	50,000
42	6411	Tooth Filling With Pin Additional-Posterior	60,000
43	6273	Video Nasolaryngoscopy	60,000
44	963297	Laparotomy - Bowel resection & Anastomosis	400,000
45	963295	Hypospadias Repair (Revision)	300,000
46	963296	Hypospadias Repair (Second Stage- Tubularization)	560,000
47	963299	Hypospadias Repair (Staged with Graft)	300,000
48	963294	Thoracotomy + Pneumonectomy	650,000
49	1163331	Coronary Angioplasty/Stenting (excluding Stent(s) & Balloon (s) cost)	2,000,000
50	6424	Denture per tooth up to 13 number of teeth (each)	25,000



Alleens

	Price Schedule for Major Surgeries			
S/n	Item Code	Item Name	Price	
1	42137	Achiles Tendon Osseo Ligament Operation	300,000	
2	42138	Achiles Tendon Repair	300,000	
3	42139	Acromioclavicular (AC) Joint Subluxation	300,000	
4	42003	Amputation - Above Knee	300,000	
5	42004	Amputation - Below Knee	300,000	
6	42164	Amputation - Femur Trans-femoral	300,000	
7	42207	Amputation - Through Arm	300,000	
8	42208	Amputation - Through Forearm	300,000	
9	42210	Amputation -Tibia Transtibial	300,000	
10	42140	Ankle Arthrodesis	300,000	
11	42141	Ankle Disarticulation	300,000	
12	42005	Anti-Reflux Procedure For Achalasia	450,000	
13	42006	Appendicectomy	350,000	
14	6288	Arthroscopy diagnostic	590,000	
15	42142	Arthroscopy therapeutic	590,000	
16	42007	Arytenoidectomy	450,000	
17	42143	Avulsed Epicondyle fixation	400,000	
18	42144	Avulsed Greater Tuberosity Fixation	400,000	
19	42008	Balloon Bronchoplasty	230,000	
20	42145	Biceps Tendon / Ligament Repair	350,000	
21	43003	Bilamellar Tarso Rotation	400,000	
22	42009	Bilateral Salphingo Ophorectomy (BSO)	350,000	
23	42013	Breast Lumpectomy	150,000	
24	42015	Burst Abdomen- Repair	300,000	
25	42016	Caesarean Section and BTL	220,000	
26	42017	Caesarian Section (C/S)	220,000	
27	42146	Calcaneum ORIF (Open Reduction & Internal Fixation)	400,000	
28	42147	Calcaneum Reconstruction	400,000	
29	42018	Cald Well Luc operation	200,000	
30	42148	Carpal Bone Fracture ORIF	370,000	
31	43255	Cataract Removal WITH intraocular lens insertion (IOL)	240,000	
32	43259	Cataract Removal WITHOUT intraocular lens insertion (IOL)	240,000	
33	42149	Clavicle Fracture ORIF	400,000	
34	42152	Colles Or Distal Radial Epiphyseolysis	400,000	
35	42023	Colostomy Closure - Laparotomy	350,000	
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Price Schedule for Major Surgeries			
S/n	Item Code	Item Name	Price
36	42024	Colostomy Closure - Non Laparotomy	100,000
37	42025	Colostomy Defunctioning	300,000
38	42026	Colostomy Revision	300,000
39	42027	Condylectomy (Bilateral)	400,000
40	42028	Condylectomy (Unilateral)	300,000
41	42029	Conjunctival Flap	120,000
42	42030	Contracture Release	200,000
43	43258	Corneal/Scleral Foreign Body Removal (Intra Occular)	200,000
44	42032	Corneal/Scleral Repair	200,000
45	42153	Craniotomy + Excision Of Epileptic Focus	800,000
46	42033	Cystocele Repair	400,000
47	42034	Cystolithotomy/Vesicostomy	400,000
48	42036	Dental Tumour/Cyst Excission under GA	300,000
49	42037	Direct Visual Urethrotomy (DVU)	400,000
50	42154	Distal Radial Fracture - Intra Articular(ORIF)	400,000
51	42038	Ectopic Pregnancy Operation	200,000
52	42156	Elbow Disarticulation	300,000
53	42158	Elbow Joint Arthrodesis	300,000
54	42040	Enterocele Repair	300,000
55	42042	Excision of Cervical Stump	250,000
56	42159	Excision of Spinal AVM (Arteriovenous Malformation)	600,000
57	42044	Exenteration/Evisceration (Eye)	450,000
58	42160	Extensors (all) Repair	400,000
59	42161	Extensors (one/two) Repair	400,000
60	42045	Eye Anterior Chamber Washout	300,000
61	42046	Eye Enucleation	350,000
62	42047	Eyelid Reconstruction	345,000
63	42162	Femoral Shaft (Diaphyseal) 32 - A & B K-Nail - ORIF	520,000
64	42163	Femur disarticulation	300,000
65	42165	Flexor Muscle/Tendon (All) Repair	400,000
66	42166	Flexor Muscle/Tendon (One / Two) Repair	400,000
67	43260	Foot Amputation	300,000
68	42169	Foot Lambrinudi (operation for foot drop)	400,000
69	42170	Foot Triple Arthrodesis	400,000
70	42171	Fracture Both Radius And Ulna - ORIF	650,000
71	42172	Fracture Head Of Humerus ORIF	650,000
72	42173	Fracture Metacarpals - ORIF	350,000





	Price Schedule for Major Surgeries			
S/n	Item Code	Item Name	Price	
73	42174	Fracture Radius Or Ulna - ORIF	400,000	
74	42175	Galleazi Fracture	400,000	
75	42051	Gastrostomy	300,000	
76	42135	Goniotomy	550,000	
77	42176	Hand Implant Removal (Plates, Screws, Nails, External Fixators)	150,000	
78	42053	Hernia Repair - Diaphragmatic	300,000	
79	42054	Hernia Repair - Epigastric	300,000	
80	42055	Hernia Repair - Incisional	300,000	
81	42056	Hernia Repair - Inguinal	300,000	
82	42057	Hernia Repair - Umbilical	300,000	
83	42058	Herniotomy (Paediatric)(Bilateral/Unilateral)	300,000	
84	42177	Hip Abductor / Flexor / Adductor Tenotomy Open	450,000	
85	42178	Hip Arthrodesis (with Implant)	950,000	
86	42179	Hip Disarticulation	400,000	
87	42180	Humerus Implant Removal (Plates, Screws, Nails, External Fixators)	150,000	
88	42181	Humerus Simple ORIF	400,000	
89	42059	Hydrocoelectomy	150,000	
90	42060	Hysterectomy (Sub/Total)	350,000	
91	42061	Hysterectomy and BSO	350,000	
92	42184	Incision & Drainage Under GA (Liver Abscess/Ischio Rectal Abscess/Joint Infection/Head and Neck Masses)	150,000	
93	42182	Insertion Of Reservoir E.G. Ommaya	120,000	
94	42063	Intra Nasal Antrostomy	200,000	
95	42186	Knee Arthrodesis	300,000	
96	42187	Knee Disarticulation	300,000	
97	42188	Knee Flexion Contracture Release	300,000	
98	42065	Laparoscopic Bilateral Tubal Ligation (BTL)	350,000	
99	42074	Laparotomy - Abdominal Trauma (Splenectomy/Liver)	560,000	
100	42066	Laparotomy - Adhesion Release	350,000	
101	42019	Laparotomy - Cholecystectomy /Illiostomy	400,000	
102	42020	Laparotomy - Cholecystectomy + CBD Exploration	450,000	
103	42049	Laparotomy - Gastrectomy + Bypass /Total	800,000	
104	42050	Laparotomy - Gastrojejunostomy	350,000	
105	42052	Laparotomy - Hemicolectomy	600,000	
106	42067	Laparotomy - Peptic Ulcer Operation / Vagotomy + Bypass (Gastrojejunal)	350,000	
107	42068	Laparotomy - Perforation of Viscera	350,000	
108	42069	Laparotomy - Peritonitis /Infection	350,000	
109	42021	Laparotomy- Cholecystojejunostomy	350,000	





	Price Schedule for Major Surgeries			
S/n	Item Code	Item Name	Price	
110	42072	Laparotomy for Other Conditions	350,000	
111	42073	Laryngeal Fissure Excission	520,000	
112	43195	Lower limb implant removal	150,000	
113	42075	Mandibular/Maxillary/ jaw Grafting	700,000	
114	42077	Mastectomy (simple /radical/Modified radical/Breast Conserving)	560,000	
115	42079	Michrodocotomy	300,000	
116	42080	Microlaryngeal Surgery	200,000	
117	42189	Monteggia Fracture	400,000	
118	42081	Myomectomy	350,000	
119	42082	Myringotomy + Gromments Insertion	320,000	
120	42083	Nasal Polypectomy	350,000	
121	42084	Nephrectomy(Partial/Total)	360,000	
122	42085	Nephrolithotomy	350,000	
123	42190	Nerve Repair	270,000	
124	42191	Olecranon Fracture ORIF	400,000	
125	42087	Open Reduction-Temporo-mandibular Joint (TMJ)/mandible	560,000	
126	42088	Open Reduction-Zygomatic Arch	450,000	
127	42089	Oral Antral Communication Repair under GA	425,000	
128	42090	Orchidectomy (Unilateral/Bilateral)	300,000	
129	42091	Orchidopexy (Unilateral/Bilateral)	300,000	
130	42092	Ovarian Cystectomy	350,000	
131	42093	Ovarian Drilling	300,000	
132	42224	Palate Repair	300,000	
133	42094	Pancreatic or Cyst Drainage (Cystogastrostomy)	570,000	
134	42111	Partial Parotidectomy (SUPERFICIAL PAROTIDECTOMY)	400,000	
135	42194	Patella Fractures ORIF (Wiring Otc)	400,000	
136	42195	Patella Fractures Total or Partial Patelectomy	400,000	
137	42095	Percutaneous Endoscopic Gastrotomy (PEG)	300,000	
138	42196	Phallanges - ORIF	200,000	
139	42097	Priapism Operation (Shunting)	300,000	
140	42099	Pyloromyotomy	350,000	
141	42197	Radial Head (ORIF)	400,000	
142	42198	Radius / Ulna Implant Removal (External Fixators ,Plates, Nails, Screws)	150,000	
143	42100	Rectocele Repair	300,000	
144	42102	Salivary Duct Stone Removal	200,000	
145	42199	Scaphoid Fracture - ORIF	400,000	
146	42103	Sequestrectomy /Saucerization Osteomyelitis (Complex)	400,000	





	Price Schedule for Major Surgeries			
S/n	Item Code	Item Name	Price	
147	42104	Sequestrectomy Osteomyelitis-Dental (Under GA)	400,000	
148	42193	Sequestrectomy With External Fixation /Osteomyelitis Saucerization	600,000	
149	42200	Shoulder Disarticulation	400,000	
150	42201	Shoulder Dislocation - Open Reduction	300,000	
151	42108	Sling Procedure for Incontinence	350,000	
152	42110	Submandibular Salivary Gland Excision	300,000	
153	42203	Supracondylar Fracture ORIF - In Children	400,000	
154	42202	Supracondylar Fracture ORIF- In Adults	400,000	
155	42204	Surgical Debridement (SD) With External Fixator	300,000	
156	41117	Surgical Debridement (SD) Without External Fixator	150,000	
157	42112	Syndactyl Release/Separation	200,000	
158	42205	Talus ORIF	400,000	
159	42206	Talus Reconstruction	400,000	
160	42113	Thoracoscopy	200,000	
161	42114	Thymomectomy	500,000	
162	42116	Thyroglossal Cyst/Fistula Excision	400,000	
163	42117	Thyroidectomy	500,000	
164	42209	Tibia Disarticulation	300,000	
165	42211	Tibia Plateau 41 - A & B ORIF	500,000	
166	43125	Tibia Plateau 41 - C ORIF	400,000	
167	42213	Tibia Shaft (Diaphyseal) 42 - A & B Nail	400,000	
168	42214	Tibia Shaft (Diaphyseal) 42 - A & B Plate	400,000	
169	42215	Tibia Shaft (Diaphyseal) 42 - C Locking Nail	400,000	
170	42216	Tibia Shaft (Diaphyseal) 42 - C Over Bridging Plate	400,000	
171	42118	Tonsillectomy/Adenoidectomy/Adenoido-tonsillectomy	250,000	
172	42119	Total Parotidectomy	400,000	
173	42120	Tracheostomy	200,000	
174	42121	Transurethral Resection of Bladder Tumour (TURBT)	680,000	
175	42122	Transurethral Resection of Prostate (TURP)	680,000	
176	42217	Triceps Tendon /Ligament Repair	350,000	
177	42125	Turbinectomy	200,000	
178	42126	Ureterolithotomy	400,000	
179	42128	Varicose Vein High Ligation + Stripping	400,000	
180	42130	Varicose Vein Surgery /Stripping + Skin Grafting (Partial/Full/Slit)	500,000	
181	42218	Ventrilisation Pattela	400,000	
182	42220	Weber Injury Type B Open Reduction	400,000	
183	42221	Weber Injury Type C Open Reduction	400,000	





Price Schedule for Major Surgeries			
S/n	Item Code	Item Name	Price
184	42219	Werber Injury Type A Open Reduction	400,000
185	42131	Wide Excision (Major) - Tumour	525,000
186	42222	Wrist Joint Arthrodesis	300,000
187	42223	Wrist ORIF	490,000
188	42011	Branchial Cyst/Fistula Excision	400,000





	Price Schedule for Specialized Surgeries			
S/n	Item Code	Item Name	Price	
1	43001	Abdominal Perineal Resection	800,000	
2	43069	Anterior Cranial Fossa Repair	850,000	
3	43244	Bilateral Insertion of DJ stent	340,000	
4	43070	Burr Hole Drainage Of Chronic Sub dural Haematoma (CSDH)	300,000	
5	43071	Cervical Spinal Fusion	1,110,000	
6	43072	Clubfoot Corrective Surgery With Bone Surgery	400,000	
7	43005	Conjunctival Graft	500,000	
8	43241	Contact Lithotripsy(Including DJ Stent)	800,000	
9	43006	Corneal Grafting, Vitro, Retinal, Orbital and Occular Correction Surgery	650,000	
10	43074	Cranioplasty	600,000	
11	43076	Craniotomy + Evacuation Of Acute SDH	600,000	
12	43075	Craniotomy + Evacuation Of Epidural Hematoma EDH)	600,000	
13	43073	Craniotomy + Evacuation Of Spontaneous Intracerebral Haematoma	600,000	
14	43077	Crutchfield / HALO	230,000	
15	43010	Cytoreductive surgery	800,000	
16	43009	Dacro-CystoRhinostomy	500,000	
17	43078	Decompressive Craniotomy	600,000	
18	43079	Distal Tibia (Pilon) II & III ORIF	600,000	
19	43246	DJ stent different sizes with guide wire (unilateral/bilateral)	200,000	
20	43247	DJ stent removal	200,000	
21	43080	Elevation Of Depressed Skull Fracture	600,000	
22	43081	Endoscopic Third Ventriculostomy (ETV)	1,110,000	
23	43025	Esophagectomy	1,000,000	
24	43082	Excision of Spinal Epidural Tumor	1,300,000	
25	43083	Excision of Spinal Intradural Tumor	1,300,000	
26	43084	Exploratory Burr Holes	300,000	
27	43242	External Shock Wave Lithotripsy (ESWL) Session for renal stones	300,000	
28	43085	External Ventricular Drainage	400,000	
29	43086	Extracapsular Trochanteric 31 - A - ORIF	750,000	
30	43087	Femoral Shaft (Diaphyseal) 32 - A & B	600,000	
31	43088	Femoral Shaft (Diaphyseal) 32 - A & B Locking Nail	600,000	
32	43089	Femoral Shaft (Supracondylar) 33 - A & B Over Bridging Plate	600,000	
33	43090	Femoral Shaft (Supracondylar) 33 - C - ORIF	600,000	
34	43091	Gasserian Ganglion Glycerol Injection	475,000	
35	43012	Hemi/Partial maxillectomy	640,000	
36	43011	Hemimandibulectomy	640,000	
37	43013	Hypospadias Repair (Single Stage)	560,000	





	Price Schedule for Specialized Surgeries			
S/n	Item Code	Item Name	Price	
38	43093	Intracapsular Femoral Head 31 - C - ORIF	750,000	
39	43094	Intracapsular Femoral Neck 31 - B - ORIF	750,000	
40	43097	Joint Replacement (Arthroplasty) Hip Hemi Arthroplasty(Including Implant)	950,000	
41	43095	Joint Replacement (Arthroplasty) Total Hip	1,100,000	
42	43096	Joint Replacement (Arthroplasty) Total Knee	1,400,000	
43	43067	Knee Ligament Repair/Reconstruction(Anterior&Posterior Cruciate/Medial &Lateral)	400,000	
44	43100	Laminectomy	400,000	
45	43230	Laparoscopic assisted colectomy	800,000	
46	43238	Laparoscopic Assisted Cystectomy and Urinary Dirversion	800,000	
47	43234	Laparoscopic diaphragmatic hernia repair	600,000	
48	43232	Laparoscopic Heller's myotomy for Achalasia	800,000	
49	43229	Laparoscopic hernia(Femoral/Inguinal/Incisional) repair with mesh	800,000	
50	43015	Laparoscopic Myomectomy	500,000	
51	43239	Laparoscopic ovarian drilling.	400,000	
52	43237	Laparoscopic Ovariectomy & salpingectomy	600,000	
53	43233	Laparoscopic repair of urinary bladder	400,000	
54	43231	Laparoscopic splenectomy	600,000	
55	43223	Laparoscopy (with necessary biopsies) - adhesion/ bowel obstruction	600,000	
56	43224	Laparoscopy (with necessary biopsies) - appendectomy	600,000	
57	43225	Laparoscopy (with necessary biopsies) - cholecystectomy	750,000	
58	43226	Laparoscopy (with necessary biopsies) - diagnostic	200,000	
59	43227	Laparoscopy(with necessary biopsies) - Nissen fundoplication	800,000	
60	43019	Lefort III-Zygomatic fracture reduction	500,000	
61	43018	Lefort II-Zygomatic fracture reduction	500,000	
62	43017	Lefort I-Zygomatic fracture reduction	500,000	
63	43002	Lower Anterior Resection Rectum	500,000	
64	43101	Lumbar Discectomy	750,000	
65	43102	Lumbar Fusion	900,000	
66	43103	Lumboperitoneal Shunt	900,000	
67	43020	Lung Decortication	800,000	
68	43021	Lung Lobectomy	800,000	
69	43022	Manchester Operation (Uterine Prolapse)	800,000	
70	43104	Microvascular Decompression	800,000	
71	43024	Modified Radical Neck Dissection	600,000	
72	43105	Nerve Transfer	1,100,000	
73	43106	Operation For Craniosynostosis	800,000	
74	43107	Operation For Encephalocele	600,000	
75	43108	Operation For Meningomyelocele	600,000	





	Price Schedule for Specialized Surgeries			
S/n	Item Code	Item Name	Price	
76	43109	Operation Of Brain Tumors, Abscesses, Fistula Etc	800,000	
77	43111	ORIF Spinal Fractures And Dislocation With Stabilization	1,000,000	
78	43026	Para Pharyngeal Tumour Excision	600,000	
79	43028	Pelvic Exenteration	700,000	
80	43066	Pelvic Fracture Reconstruction(Acetabular, Pelvic Ring) - ORIF	1,110,000	
81	43243	Percutaneous nephrolithotomy (PCNL) for Large renal stones	600,000	
82	43030	Phaeco-Emulsification Surgery	300,000	
83	43031	Plastic Surgery - Flap	300,000	
84	43032	Pneumonectomy	800,000	
85	43033	Portal Systemic Shunt Procedure	800,000	
86	43180	Posterior Sagittal Anorectoplasty - PSARP (Pull Through Operation)/ Anterior sagittal anorectoplasty(ASARP)	800,000	
87	43034	Prostatectomy (Open)	246,000	
88	43036	Ptosis Surgery	600,000	
89	43065	Pyeloplasty - Pelviureteric Junction (PUJ) (Including Stent)	800,000	
90	43008	Radical Cystectomy for Urinary Bladder Cancer	800,000	
91	43061	Radical Hysterectomy(Waltheim)	350,000	
92	43037	Radical Mastoidectomy	800,000	
93	43039	Radical Vulvectomy	700,000	
94	43040	Rib Resection	575,000	
95	43115	Rotator Cuff Tear repair	625,000	
96	43116	Scoliosis Operation	1,200,000	
97	43041	Scrotoplasty	400,000	
98	43117	Shoulder Arthroplasty	1,050,000	
99	43118	Shoulder Joint Arthrodesis	400,000	
100	43253	Spinal Bifida closure	700,000	
101	43042	Stapedectomy	700,000	
102	43119	Stereotactic Operation	1,200,000	
103	43043	Strabismus Surgery (Squint Surgery)	700,000	
104	43120	Subtrochanteric Femoral Fracture - Type B - ORIF	600,000	
105	43121	Subtrochanteric Femoral Fracture - Type C - ORIF	600,000	
106	43122	Subtrochanteric fracture of femur - Type A - ORIF	600,000	
107	43044	Supraglottic Laryngectomy	800,000	
108	43123	Surgical Debridement (SD) With External Fixation + Vascular Repair	700,000	
109	43045	Surgical Speech Fistula Reconstruction	240,000	
110	43236	Thoracoscopic pericardial window	800,000	
111	43124	Tibia Plateau 41 - A & B ORIF & Bone Graft	600,000	
112	42212	Tibia Plateau 41 - C ORIF & Bone Graft	600,000	
113	43014	Total laparoscopic hysterectomy (TLH)	800,000	





Price Schedule for Specialized Surgeries			
S/n	Item Code	Item Name	Price
114	43049	Total Laryngectomy	1,100,000
115	43050	Total Mandibulectomy	960,000
116	43047	Total Maxillectomy	960,000
117	43051	Trabeculectomy	800,000
118	43052	Tracheal Oesophaeal Fistula Closure	800,000
119	43053	Trans Antral Ligation of Vessels	800,000
120	43054	TympanoMastoidectomy	960,000
121	43055	Tympanoplasty I-IV	800,000
122	43056	Ureteric Reimplantation(Including stent)	680,000
123	43240	Ureterscopy URS	300,000
124	43154	Urethroplasty	400,000
125	43057	Urethroplasty using buccal mucosa	700,000
126	43058	Vaginal Hysterectomy	400,000
127	43127	Ventriculo-peritoneal Shunt For Hydrocephalus	750,000
128	43059	Vertical Hemilaryngectomy	800,000
129	43248	Vesical Vaginal Fistula Repair (VVF)	500,000







ANNEX IV SPECIALISED CARDIAC SERVICES



	Price Schedule for Specialized Cardiac Surgeries			
S/n	Item Code	Item Name	Price	
1	6407	Prosthesis for Vascular Surgery By-pass	847,500	
2	6370	AICD Implantation(Excluding generator)	2,500,000	
3	6589	Aortic Valve Repair	9,650,000	
4	6403	Aortic Valve Replacement	10,780,000	
5	6585	Aorto-pulmonary Window repair	8,850,000	
6	6397	Arterial Switch Operation	8,850,000	
7	6588	Ascending aortic aneurysm repair	10,000,000	
8	6390	Atrial Septal Defect (ASD) Closure	8,850,000	
9	6392	Atrio-Ventricular Canal Repair	8,850,000	
10	6394	Bi-directional Glenn	8,850,000	
11	6369	Biventricular Pacing/Cardiac Resynchronization Therapy (exluding Device Cost)	3,500,000	
12	6398	CABG - Coronary Artery bypass Graft	15,450,000	
13	6575	Cardiac ABG	30,000	
14	6572	Cardiac Monitor-24Hrs-BP/Hp	75,000	
15	6571	Cardiac Monitor-less than 4Hrs	40,000	
16	6580	Coarctation of Aorta Repair	5,000,000	
17	6353	Diagnostic Coronary Angiography	1,200,000	
18	6404	Double Valve Replacement	13,040,000	
19	6396	Fontan operation	4,000,000	
20	6586	Hemitruncus Arteriosus repair	10,000,000	
21	6591	High up ligation	600,000	
22	6238	Intra Cardiac Device/ ICD interrogation (eg.Pacemaker Interrogation/Biventricular Device Interrogation)	30,000	
23	6399	Mitral valve repair	9,650,000	
24	6400	Mitral valve replacement	10,780,000	
25	6401	Mitral valve replacement & Tricuspid Annuloplasty	11,910,000	
26	6581	Modified Blalock-Taussig Shunt	8,850,000	
27	42086	Open Chest Drainage (Chest Window, Thoracostomy, Thoracotomy)	650,000	
28	6364	Pacemaker Battery Change (excluding pacemaker battery/device cost)	1,000,000	
29	6254	Pacemaker interrogation	45,000	
30	43172	PDA Closure (OFF PUMP)	4,000,000	
31	6368	Percutenous Balloon Mitral Valvulopasty/ Commisurectomy	3,500,000	
32	6374	Peripheral Arteriogram/Angiogram	1,200,000	
33	6582	Pulmonary Artery Banding	5,000,000	
34	6366	Right & Left Catheterization Heart Studies	1,800,000	
35	6395	TAPVC - Total Anomolous of pulmonary venous connection	8,850,000	





Price Schedule for Specialized Cardiac Surgeries					
S/n	Item Code	Item Name	Price		
36	6365	Temporary Pacemaker insertion	700,000		
37	6393	Tetralogy of Fallot (TOF) Repair	8,850,000		
38	6406	Vascular Surgery without prosthesis/by-pass	3,195,000		
39	6391	Ventral Septal Defect (VSD) Closure	8,850,000		
40	6362	Pacemaker Insertion excluding device (Single/Double Chamber)	1,800,000		



ANNEX V SPECIALISED ONCOLOGY SERVICES



1.11 RADIOTHERAPY SERVICES;

These are services that need a prior Fund's approval and their price at this facility includes the following;

Price Schedule for Specialized Oncology Radiotreatment					
S/ n	Item Code	Item Name	Price		
1	610118	Bone Isotopic Scan	150,000		
2	7437	Brachytherapy/intra-cavity	500,000		
3	7438	Extended Local/Hemi Body Radiotherapy	300,000		
4	7439	Keloid Radiotherapy Treatment	50,000		
5	71015	One session/fraction LINAC radiation service (Regardless of the number of field of exposure).	100,000		
6	7442	Palliative Radiotherapy	500,000		
7	7436	Radiotherapy (per field, per fraction/exposure)	50,000		
8	7440	Radiotherapy Planning	30,000		
9	7441	Radiotherapy Treatment(Shell/Mould)	30,000		
10	6472	Renal isotopic Scan	150,000		
11	610119	Thyroid isotopic Scan	150,000		

