



SCHEDULE OF INPATIENT TARIFF WITH EFFECTIVE FROM: 01-11-2024

(Note: The Approximate cost as estimated by the Doctor / PFC has to be deposited at the time of admission itself.) Ph. No:
25024341/42



PARTICULARS	DAYCARE	GENERAL	TRIPPLE	SEMI SPECIAL	SPECIAL	DELUXE	SUITE	ICU
REGISTRATION CHARGES	250	250	250	250	250	250	250	250
ADMISSION CHARGES	0	0	0	0	0	0	0	0
INPATIENT ROOM CHARGES								
BED CHARGE	2100	2400	2800	5000	7000	8500	19000	9000
MULTISHARING (PAEDIATRIC WARD)	2500	2500	2500	2500	2500	2500	2500	2500
ICU CHARGES								
MICU/KTU/CCU/CTVS ICU BED CHARGES	9000	9000	9000	9000	9000	9000	9000	9000
PICU BED CHARGES	8500	8500	8500	8500	8500	8500	8500	8500
HIGH DEPENDENCY BED CHARGE	7500	7500	7500	7500	7500	7500	7500	7500
NEONATAL ICU-HIGH INTENSIVE BED CHARGE	5000	5000	5000	5000	5000	5000	5000	5000
NEONATAL ICU- LOW INTENSIVE BED CHARGE	2600	2600	2600	2600	2600	2600	2600	2600
CRADLE CHARGES	600	600	600	600	600	600	600	600
CLINICAL MANAGEMENT FEE PER VISIT:								
CLINICAL MANAGEMENT FEE Specialty	900	900	900	900	1000	1100	1200	1000
CLINICAL MANAGEMENT FEE Super Specialty	1100	1100	1100	1100	1200	1300	1500	1200
HIGH DEPENDENCY CONSULTATION CHARGES	1100	1100	1100	1100	1200	1300	1500	1200
Consultation Neonatal - LSCS Emergency	1100	1100	1100	1100	1200	1300	1500	1200
Consultation - MET	1100	1100	1100	1100	1200	1300	1500	1200
Pre Anaesthesia Evaluation -IP	900	900	900	900	1000	1100	1200	1000
Pre Anaesthesia Evaluation; High Risk - IP	1100	1100	1100	1100	1200	1300	1500	1200
Consultation Dietician IP	250	250	250	250	300	400	500	300
RESIDENT MEDICAL DOCTOR FEE	200	200	200	200	200	200	200	0
ICU- CONSULTATION PER DAY	2	2	2	2	2	2	2	2
ICU- CROSS CONSULTATION PER DAY	1	1	1	1	1	1	1	1
OXYGEN / VENTILATION CHARGES								
OXYGEN CHARGES PER DAY	1700	1700	1700	1700	1700	1700	1700	1700
VENTILATION CHARGE PER DAY	2800	2800	2800	2800	2800	2800	2800	2800
VENTILATION CHARGES - BIPAP	1500	1500	1500	1500	1500	1500	1500	1500
Ventilator - Neonatal- per day	2200	2200	2200	2200	2200	2200	2200	2200
1. Operation Theatre Charges Will Be 100% of total surgeon fee.								
2. Anaesthetist fee will Be 30% of surgeon fee.								
3. Surgical support fee will be 25 % of total surgeon fee.								
4. Rates for Lab & Blood bank services, Radio-Diagnosis & Imaging, Professional Fees, Surgeries / Procedures, Theatre Charges etc. will vary as per the category of bed chosen.								
NOTE : Rates are subject to change from time to time			Restriction on cash transactions above Rs 2,00,000/- as per Government Rules					
Received Tariff Sheet:								
Signature:								
Name.....								
.....								

Add bed Category with respective to the unit



1. The Admission & Billing Section functions 24 hours.
2. **Allotment of beds in respect of advance booking will be subject to availability of beds.**
3. Patients will be discharged once he / she is medically stable. No unwarranted extension of stay will be permitted. Patients requiring will be shifted to Rehab Ward (irrespective of the category of admission).
4. **Bed charges will be calculated as per 24 hours cycle from the time of admission.**
5. **Rates for Lab & Blood bank services, Radio-Diagnosis & Imaging, Professional Fees, Surgeries / Procedures, Theatre Charges etc. will vary as per the category of bed chosen.**
6. **If a patient prefers to shift from a Lower ward to a Higher Ward, all the charges will be of Higher Ward with retrospective effect (i.e. from the time of admission except ICU stay). If the patient prefers to shift from the higher ward to the Lower Ward, the charges for the services rendered in the Higher Ward will remain at the Higher Ward rates & than lower ward charges will be applicable from the time the patient is shifted.**
7. Maternity / Delivery charges are charged as per the ward the patient gets shifted.
8. During the course of the patients stay in the Hospital, provisional bills will be sent to the patient in order to make further payments. On receiving the provisional bill, the patient will have to clear the amount on the date mentioned on the provisional bill. In case the patient does not receive a provisional bill, please contact the Billing section.
9. At the time of discharge, a final bill is made by the Billing section. The final bill is made only after all the discharge formalities are completed. You may find significant differences in the final bill and the provisional bill. This is due to the fact that certain charges will be levied and shown in the final bill only.
10. **There will be a time lag between your consultant informing you about your discharge and the Billing section producing the bill.**
11. **Direct admission to ICU will be billed at ICU rates.**
12. Extra diet and Telephone calls will be charged separately.
13. Only Demand Draft / Credit Card / Cash are accepted towards Hospital Bills. **Refunds above Rs. 10,000/- will be refunded by bank transfer only after 3 - 4 working days.**
14. **Patients are requested to retain all receipts of deposit / advances made. Original receipt will have to be produced for collecting refunds.**
15. One visitor pass will be issued to a patient free of cost and will be allowed to visit in prescribed visiting hours
16. No extra pass will be issued unless authenticated. Patients who have lost their passes should contact Admission Department for assistance. All passes have to be surrendered to Billing section at the time of discharge.
17. Management extends the rights of one attendant to stay along with the patient in Semi-Private, Private, Deluxe and Suit wards. In case, the patient is in General Ward or HDU or ICU, the attendant can seat in the lobby area in the hospital and visit the patient only in the visiting hours.
18. Night Lobby passes are issued for Inpatient (Critical Care bed only)
19. Deposit amount, Hospital charges and the above rules are always subject to changes as decided from time to time.



