



**Government of Jammu & Kashmir**  
**OFFICE OF THE MEDICAL SUPERINTENDENT ASSOCIATED**  
**HOSPITAL GMC, Kathua**



**FEE FOR LAB TEST (GR) IN AH, GMC KATHUA**

**FEE FOR DENTAL PROCEDURES (GR) IN AH, GMC KATHUA**

S.NO	NAME OF TEST	GOVT. FEES
1.	ANTERIOR RCT KID	125
2.	ANTERIOR RCT ADULT	125
3.	COMPLETE DENTURE	600
4.	COMPOSITE RESTORATION KID	150
5.	COMPOSITE SPLINT	50
6.	CORE BUILDUP	200
7.	DIRECT PULP CAPING	50
8.	GIC ADULT	100
9.	GIC KID	50
10.	GIC BUILDUP	50
11.	INDIRECTE PULP CAPING	50
12.	10 PAR (X-RAY DENTAL)	60
13.	LIGHT CURE KID	75
14.	LIGHT CURE RESTORATION	200
15.	PD	20
16.	PARTIAL DENTURE	80
17.	PIT & FISSURE	50
18.	POSTERIOR RCC KID	150
19.	POSTERIOR RCC ADULT	150
20.	PULP CAPING MTA	75
21.	PULP CAPING (CO. OH <sub>2</sub> )	50
22.	PULPECOTOMY	100
23.	PULPTOMY	100
24.	SCALING	50
25.	SILVER AMALGAM	150
26.	SINGLE COMPLETE DENTURE	300
27.	ZOE CEMENT FILLING	20

**FEE FOR PHYSIOTHERAPY PROCEDURES (GR) IN AH, GMC KATHUA**

<b>S.NO</b>	<b>NAME OF TEST</b>	<b>GOVT. FEES</b>
1.	CERVICAL THERAPY	30
2.	EXERCISE THERAPY	30
3.	IFT	30
4.	INFRA RED LAMP	20
5.	LOW BACK CONDITION	30
6.	MOBILISATION AND MANUPULATION	20
7.	MUSCLE STIMULATOR	30
8.	NERVE STIMULATOR	30
9.	SHORT WAVE DIATHERMY	40
10.	ULTRASONIC THERAPY	40
11.	UNILATERAL	20
12.	WAX THERAPY	20

**FEE FOR GOVT. BLOOD BANK (GR) IN AH, GMC KATHUA**

<b>S.NO</b>	<b>NAME OF TEST</b>	<b>GOVT. FEES</b>
1.	ANTI HBC	250
2.	ANTIBODY SCREENING	300
3.	CHEMILUMINESCENCE	500
4.	4 <sup>TH</sup> GENERATION ELISA HBSAG	50
5.	4 <sup>TH</sup> GENERATION ELISA HCV	150
6.	4 <sup>TH</sup> GENERATION ELISA HIV	50
7.	NAT	1200

**FEE FOR NON GOVT. BLOOD BANK (GR) IN AH, GMC KATHUA**

<b>S.NO</b>	<b>NAME OF TEST</b>	<b>GOVT. FEES</b>
1.	CRYOPRECIPITATE	250
2.	FRESH FROZEN PLASMA	400
3.	PACKED RED CELL	1450
4.	PLATELET CONCENTRATE	400
5.	WHOLE BLOOD	1450

**FEE FOR RADIOLOGICAL INVESTIGATIONS (GR) IN AH, GMC KATHUA**

<b>S.NO</b>	<b>NAME OF TEST</b>	<b>GOVT. FEES</b>
1.	X-RAY	120

2.	ULTRASOUND	120
3.	ECG	15
4.	CT SCAN	900
5.	B SCAN	50

**FEE FOR MISCELLIANEOUS INVESTIGATIONS (GR) IN AH, GMC KATHUA**

S.NO	NAME OF TEST	GOVT. FEES
1.	DIALYSIS	950
2.	DRIVING LICENSE	100
3.	MEDICAL FEE	100
4.	ROOM AC	800
5.	NON AC ROOM	500
6.	TENDER DOC CHARGES	500

**FREE OF COST LAB TEST (GR) IN AH, GMC KATHUA**

S.NO	NAME OF TEST	GOVT. FEES
1.	BLOOD SUGAR PP	0
2.	BILURIBIUM	0
3.	BLOOD GROUPING	0
4.	BLOOD SUGAR F	0
5.	BLOOD SUGAR R	0
6.	BT	0
7.	CT	0
8.	DENGUE	0
9.	HB	0
10.	HIV	0
11.	MP	0
12.	S. ANALYSIS	0
13.	SEPTUM TEST	0
14.	STOOL RE	0
15.	TLC	0
16.	DLC	0
17.	UPT	0
18.	URINE RE	0

**FEE FOR LAB TEST FOR JSSK PATIENTS (GR) IN AH, GMC KATHUA**

<b>S.NO</b>	<b>NAME OF TEST</b>	<b>GOVT. FEES</b>
1.	ULTRASOUND	0
2.	AEC	0
3.	ALBUMIN	0
4.	ASO	0
5.	BONE MARROW	0
6.	CBC	0
7.	ESR	0
8.	PBF	0
9.	CHOLESTROL	0
10.	CREATININE	0
11.	CRP	0
12.	ELECTROLYTES (Na <sup>+</sup> K <sup>+</sup> )	0
13.	FNAC	0
14.	HBSAG	0
15.	HCV	0
16.	KFT	0
17.	LFT	0
18.	CYTOLOGY	0
19.	PBF FOR MP	0
20.	PT/PTI/INR	0
21.	R FACTOR	0
22.	SIMEN ANALYSIS	0
23.	SGOT	0
24.	SGPT	0
25.	SODIUM / POTASSIUM	0
26.	URIC ACID	0
27.	STS	0
28.	TOTAL PROTIEIN	0
29.	TRI GLLYCERIDE	0
30.	UREA	0
31.	URINE FOR ACETONE	0
32.	URINE FOR UROBINOGEN	0
33.	WIDAL TEST	0
34.	PLATELET COUNT	0

**SPECIAL PROCEDURES IN THE DEPARTMENT OF PATHOLOGY**

<b>S.NO</b>	<b>NAME OF TEST</b>	<b>GOVT. FEES</b>
1.	BONE MARROW EXAMINATION	40
2.	CERVICAL SMEAR	40

3.	WET CYTOLOGY	40
4.	MELIGNANT CYTOLOGY	40
5.	CERBRO SPINAL FLUID (CSF)	40

**Note:- Ayushman Bharat beneficiary are being provided the services to which they are entitled.**

Medical Superintendent  
Associated Hospital  
GMC Kathua