



Reference No: 0015/19

23/09/19

To,
Chief Police Inspector,
Traffic Police
Rawalpindi

Subject:- Traffic Police Rawalpindi Panel For City Hospital

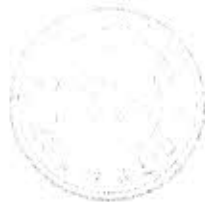
Dear Sir,

With due respect, this is to inform you, that we at City Hospital are running one of the best hospital in private setup of Wah Cantt. We have catered for providing every type of medical and surgical facility in the same setup. Our hospital is equipped with all kind of Medical, Surgical, Dental and Diagnostic/CT Scan facilities under the supervision of qualified consultants. Due to our outstanding services a number of large and prestigious Govt sector and private organizations are already on our panel. These include NESCOM, Air Weapon Complex (AWC), Project Management Organization (PMO), National Development Complex (NDC), Adamjee Insurance, Fauji Cement Co Ltd Takaful Insurance and IGI Insurance Ltd. We are the only private sector hospital in the area which is doing state of the art surgeries in Orthopedics, Neurosurgery, Endoscopy, Laparoscopic surgeries and ENT procedure is available with the help of latest equipment. Moreover we are the only hospital in this area with Cardiac facilities including Echocardiography, ETT, CCU and ICU. We are interested in having your organization on our panel for providing best of medical facilities for your clients and their families. It will be our pleasure to host you and this introductory letter is an invitation to your good self to kindly visit our Hospital so that you could better asses what we have claimed. Looking forward for a favorable reply.

Sincerely & Regards

Yours truly

Director
City Hospital
Wah Cantt



Discount = 15%

FULLY EQUIPPED EMERGENCY DEPARTMENT WITH 24 HOURS SERVICES

A-23/1, Quaid Avenue, Near Akhri Stop, Wah Cantt. Ph. 051-4540425, 051-4539242, Fax: 051-4540418

CITY HOSPITAL
CT SCAN RATE LIST

S NO	PROFILE NAME	FINAL PRICE
1	CT ABDOMEN ANGIOGRAPHY (WITH CONTRAST)	16,000.00
2	CT BRAIN ANGIOGRAPHY (WITH CONTRAST)	16,000.00
3	CT CHEST ABDOMEN AND PELVIS WITHOUT CONTRAST	18,000.00
4	CT CHEST ABDOMEN AND PELVIS WITH CONTRAST	18,000.00
5	CT FACE AXIAL+CORONAL WITHOUT CONTRAST	22,000.00
6	CT FACE WITH CONTRAST	6,500.00
7	CT GUIDED BIOPSY	18,000.00
8	CT LOWER LIM ANGIOGRAPHY (WITH CONTRAST)	16,000.00
9	CT NECK ANGIOGRAPHY(WITH CONTRAST)	16,000.00
10	CT NECK AXIAL CORONAL WITH CONTRAST	11,000.00
11	CT PNSAXIAL CORONAL WITHOUT CONTRAST	8,000.00
12	CT AXIAL CORONAL WITH CONTRAST	10,000.00
13	CT PULMONARY ANGIOGRAPHY (WITH CONTRAST)	16,000.00
14	CT SCAN ABDOMEN & PELVIS WITH CONTRAST	14,500.00
15	CT SCAN ABDOMEN AND PELVIS WITHOUT CONTRAST	10,500.00
16	CT SCAN ABDOMEN WITH CONTRAST	9,500.00
17	CT SCAN ABDOMEN WITHOUT CONTRAST	7,500.00
18	CT SCAN ANKLE JOINT WITH CONTRAST	10,000.00
19	CT SCAN BRAIN WITHOUT CONTRAST	5,500.00
20	CT SCAN WITH CONTRAST	8,000.00
21	CT SCAN CERVICAL SPINE WITHOUT CONTRAST	8,000.00
22	CT SCAN CHEST WITH CONTRAST	8,500.00
23	CT SCAN CHEST WITHOUT CONTRAST	7,500.00
24	CT SCAN D/L SPINE WITHOUT CONTRAST	8,000.00
25	CT SCANE ELBOW JOINT WITHOUT CONTRAST	8,500.00
26	CT SCAN FACE WITH CONTRAST	8,500.00
27	CT SCANE FORE ARM WITH CINTRAST	10,500.00
28	CT SCAN HRCT WITHOUT CONTRAST	7,500.00
29	CT SCAN JOINT WITHOUT CONTRAST	8,000.00
30	CT SCAN KUB WITH CONSTAST	9,500.00
31	CT SCAN KUB WITHOUT CONTRAST	7,500.00
32	CT SCAN L/S SPINE WITHOUT CONTRAST	8,000.00
33	CT SCAN NECK WITH CONTRAST	8,500.00
34	CT SCAN NECK WITH OUT CONTRAST	6,500.00
35	CT SCAN ORBIT WITHOUT CONTRAST	5,500.00
36	CT SCAN PAROTID GLAND WITH CONTRAST	8,500.00
37	CT SCAN PELVIS WITH CONTRAST	9,500.00
38	CT SCAN PELVIS WITHOUT CONTRAST	7,500.00
39	CT SCAN PNS WITHCONTRAST AXIAL	8,000.00
40	CT SCAN PNS WITHOUT CONTRAST	5,500.00



	CT SCANOGRAME WITHOUT CONTRAST	4,500.00
42	CT TEMPORAL BONE AXIAL AND CORONAL WITHOUT CONTRAST	8,500.00
43	CT TEMPORAL BONE WITH CONTRAST	9,500.00
44	CT TRIPHASICS ABDOMEN WITH CONTRAST	10,500.00
45	CT WRIST JOINT WITHOUT CONTRAST	8,000.00
46	CT/MRI FILMS TWO	1,000.00
47	CT/MRI FOUR FILMS	2,000.00

NOTE: In case of with contrast CT Scan a patient will be charged Rs 3500 on behalf of the contrast injection price.

In case of uncouncious patients and involuntary movement the ceedation charges RS 2000 will be charged for the services of Anesthetic Doctor.

CASH PATIENTS RATE LIST

S/O	PROCEDURE NAME	AMOUNT
1	NORMAL DELIVERY	13000
2	NORMAL DELIVERY TWIN BABIES	16000
3	C-SECTION	28000
4	C-SECTION TWIN BABIES	33000
5	D&C /E&C /TOP/ CERVICAL STITCH	14000
6	VACUUM DELIVERY	15000
7	LAPPROTOMY	38000
8	VAGINAL HYSTERECTOMY	38000
9	C-SECTION + BTL	33000
10	LAMINECTOMY	33000
11	LAPROSCOPIC CHOLECYSTECTOMY	38000
12	TONSILLECTOMY	16000
13	POLIPECTOMY	18000
14	DNS	18000
15	CIRCUMCISION G/A	6000
16	APPENDECTOMY	24000
17	CHLOECYSTECTOMY	28000
18	Complex pelvic fixation	68000
19	Total knee Replacement	25000
20	Total Hip Replacement	18000
21	Small Bone Operation	18000
22	Amptation Below Knee	43000
23	Closed Reduction K wire Fixation	18000
24	Closed Reduction	18000
25	PoP Plain	3500
26	Long Bone Fixation	48000
27	Amputation leg above knee joint	43000
28	Amputation of arm above elbow	43000



29	TEV Correction	43000
30	Correction of Hand / Foot Deformity	48000
31	Interlocking Nail Tibia DHS	48000
32	Interlocking Femur	48000
33	Pelvic Fixation	58000
34	Partial Knee Replacement	53000
35	Partial Hip Replacement	53000

Room Charges

1	General Ward (Male / Female)	1800
2	General Room Room 7 + 8+ 9	2200
3	Semi-private room Room 1 - Room 2 Unit o1+02	2500
4	Private Room 3+4+5+6+10	3000
5	VIP Room 2	3500
6	Vip Room 1	5000
7	ICU/CCU	5000
8	Nursery incubator	4000

CONSULTANT INDOOR VISIT

1	Specialist Consultation in room /ward/ nursery	700/day
2	Specialist Consultation in ICU/CCU	1000/day
3	Medical Officer fee in room/ward/nursery	300/day
4	Medical Officer fee in ICU/CCU	400/day
5	Nursing care in room/ward/nursery	200/day
6	Nursing care in ICU/CCU	300/day

X RAY RATES

	PARTS OF BODY NAME	RATES
2	Skull Ap+Lat	600
3	C. Spine Ap+Lat	600
4	L.S Spine Ap+Lat	600
5	D. Spine Ap+Lat	600
6	Cocyn Ap+Lat	600
7	Chest PA	350
8	Chest Lat	350
9	Wrist Ap+La	600
10	Forarm Ap+Lat	600
11	Hand Ap+Lat	600
12	Elbow Ap+Lat	600
13	Shoulder Ap	350
14	Knee Ap+Lat	600
15	Ankle Ap+Lat	600
16	Foot Ap+Lat	600
17	Pelvis	350
18	Hip Joint AP	350
19	Femuer Ap+Lat	600
20	Tibia Fibula	600



21	Nasal Bone Lat	350
22	PNS	350
23	Mandible	350
24	Adiniods Lat	350
25	Mastiods	2300
26	I.V.U	3300
27	H.S.G	600
28	Si Joint Both Ap	

Hematology

		300
1	Blood Cp	150
2	Blood Hb%	100
3	Blood ESR	300
4	Blood MP Smear	350
5	MP ICT	200
6	BT CT	300
7	PT	300
8	APTT	300
9	Platelet count	200
10	Reticulocytes count	400
11	Blood Peripheral film	500
12	Dengue Serology	

Clinical pathology

		100
1	Urine R/E	300
2	Stool R/E	300
3	Sputum for AFB	300
4	Sputum R/E	

Microbiology

		1050
1	Urine C/S	1050
2	Stool C/S	1100
3	HVS C/S	1050
4	Fluids C/S	1050
5	Blood C/S	300
6	Typhidot	400
7	Mycodot	300
8	H.Pylori	400
9	CSF R/E	400
10	Other fluids R/E	

Immunology/Virology/Serology

		350
1	ASOT	400
2	CRP	300
3	RA Factor	300
4	HBs Ag	300
5	Anti HCV	



6	VDRL	400
7	HIV	300

Blood Banking

1	ABO Grouping	100
2	Blood Cross match	200
3	Blood Cross match with screening	1200
4	Rh Antibodies titre	500
5	Coomb's Direct/Indirect	500
6	Brucella (Abortus)	300
7	Brucella (Melitensis)	300

ELISA Based

1	Serum FSH	500
2	LH	500
3	Prolactin	500
4	Beta HCG	600
5	Testosterone	1050
6	Thyroid Function Tests	1600
7	T3	500
8	T4	500
9	TSH	500
10	HBsAg	1000
11	HCV	1000
12	Troponin-I (Tn-I)	1000

Biochemistry

1	Blood Sugar Fasting	100
2	Blood Sugar Random	100
3	Blood Sugar Fasting & 2hrs. AFB	200
4	OGTT	300
5	HbA1c	550
6	Liver Function Tests	300
7	Serum Bilirubin Total	200
8	Serum Bilirubin Direct	200
9	Serum ALT	200
10	Alkaline phosphatase	200
11	Serum Albumin	200
12	Serum Total	200
13	Serum Creatinine	200
14	Serum Urea	200
15	Serum Uric Acid	200
16	Serum Electrolytes	200
17	Lipid Profile	200
18	Cholesterol	200
19	Triglycerides	200

21	HDL	200
22	LDL	200
23	Cardia enzymes	1100
24	CK(CPK)NAC	250
25	LDH	200
26	AST (SGOT)	200
27	CK MB	300
28	Serum Amylase	250
29	Serum calcium	200
30	serum phosphate	200
31	Cell Morphology	500

LABORTORY RATES

1	PCR HCV RNA Qualitative	5580
2	PCR HCV RNA Quantitative	9250
3	PCR HEP. B DNA Qualitative	6000
4	PCR HEP. B DNA Quantitative	12000
5	PAP Semear for cytology	800
6	Histopathology small	2200
7	Histopathology Large	3300
8	S Cortisol	13200
9	pap smear	950
10	Toxoplasma IgG / IgM	1100
11	D Dimer	1450
12	CA-125	1950
13	IgE	1350
14	Anti TTG Ab	3440
15	Hb electrophoresis	1850
16	TIBC	550
17	Vitamin D	2500
18	Gamma GT	600
19	Ferritin	1100
20	HVS C/S	1000
21	Estrogen	1220
22	PSA	1850
23	Progesterone	1250
24	Urine C/S	1000

EMERGENCY ROOM PROCEDURE LIST

1	DRIP 1000ML	400
2	DRIP 500ML	300
3	DRIP 100ML	200
4	INJ VENOFER 1ST DOSE	500
5	INJ VENOFER 2ND DOSE	300
6	INJ AMINOVEL	300
7	PASSING FOLLEY CATHERTER	500



8	STITCHING	100 PER STITCH
9	STOMACH WASH	3500
10	PASSING NG TUBE	300
11	FOREGIN BODY REMOVEL (EAR, NOSE)	1000
12	NEBULIZATION	100
13	OXGEN	100
14	MONITORING CHARGES	100
15	COLOMY BAG CHARGES	1000
16	KLEEN ENEMA	300
17	CTG	200
18	ECG	200
19	ECHOCARDIOGRAPHY	1600
20	EXERCISE TOLERANCE TEST	2000
21	DRSSING (MAJOR)	500
22	DRESSING (MINOR)	300
23	POP BANDAGE	1500
24	BLOOD TRANSFUSION	500
25	ENDOSCOPY, COLONYSCOPY,SAGMOIDOSCOPY	5000
26	CATHERIZATION	3000
27	PHOTHO THERAPY	200PR HRS
28	I&D	3000
29	VENTILATOR	6000
30	PROCTOSCOPY	3000
31	HSG	2800
32	RETATION IHR/AFTER 1HRS	300/200/HR
33	CIRCUMCION L/A	3500

ULTRASOUND RATE LIST

S/NO	ULTRASOUND RATE LIST	RATE
1	ABDOMEN	1000
2	PELVIS	1000
3	KUB	800
4	KUB PROSTATE	1000
5	ABDOMEN PELVIS	1200
6	FEETAL WELL BEING	1200
7	ANOMALY SCAN	1200
8	EARLY PREGANCY	1600
9	FETAL DOPPLER	1000
10	TVS	1600
11	BREAST	1600
12	SCROTAL	1200
13	BRAIN	1200
14	LEG DOPPLER ONE LEG	2200
15	CAROTID DOPPLER	2200
16	LEG DOPPLER BOTH	4000
17	SOFT TISSUE	1000



18	TROIP	1200
19	CHEST	1000
20	GUIDED TAP	1500
21	FUNICULAR TRACKING	1000
22	CERVICAL LENGTH	800

