

RAMAKRISHNA SARADA MISSION MATRI BHAVAN
(Providers Health Care to Women & Children)
7A SREE MOHAN LANE, KOLKATA – 26, Ph.No: 033-24668207
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SCHEDULE OF CHARGES
Issued by
The Secretary, RKSM, MB

INTRODUCTION :

Ramakrishna Sarada Mission Matri Bhavan is a well equipped, state of art, modern 100 bedded hospital, run under the auspices of the Ramakrishna Sarada Mission, Dakshineswar, Kolkata – 700076. Inspired by Swami Vivekananda's Ideal of "Atmano Moksharthum Jagat Hitaya Cha" - Salvation of the self and welfare of the world, it has been rendering dedicated services since 1950 to women and children. Services rendered are the latest treatment facilities in Obstetric Care, Gynaecology, General Laparoscopic Surgery, General Medicine, Paediatrics, Level-III Neonatology Care, Ophthalmology, E.N.T., Orthopaedics and Dermatology, Physiotherapy, Dental supported by a well equipped in-house Laboratory and Pharmacy. These services are provided at highly subsidised rates, further concession/free services are rendered according to the need. Dedicated, specialized and efficient team of Doctors, Nurses and staff, provide 24 hrs coverage and care to our patients.

Important Information :

1. This Schedule of Charges made with rationalisation.
2. All the payments are to be made in advance prior to admission.
3. For confinement cases - delivery/caesarean charges are to be deposited compulsory within one month from the date of outdoor registration. If booking is cancelled by the patient's party, 25 % of the deposited will be the cancellation charges.
4. Other Operation Charges are to be deposited at the Hospital at the time of Operation Booking.
5. Supply of Medicines: Prescribed medicines are to be supplied to all Indoor Patients by the Sree Ma Pharmacy. For this, an advance deposit of 8,000/- (Rupees Eight thousand) is taken for each patient at the time of admission.
6. All bills sent to the indoor patients are required to be paid within 24 Hrs of presentation.
7. Supply of Blood for the patients is to be arranged by the Patients' parties if needed.
8. All Hospital Bills are adjusted against Advance Deposits at the time of Patients' Discharge from the Hospital.
9. The diet supplied from the Matri Bhavan is free of cost.
10. If Ayaha is needed to the patient, it will be arranged and Ayaha Charges are payable.

A. OPD CHARGES :

(a) REGISTRATION CHARGES	(₹)
1 Antenatal Registration	100
2 Gynecology Registration	100
3 Medicine Registration	100
4 Paediatric Registration	150
5 Surgery Registration	100
6 Dermatology Registration	50
7 ENT Registration	50
8 Ophthalmology Registration	50
9 Orthopaedics Registration	50
10 Dental Registration	50
11 Physiotherapy Registration	50
12 Neonate Registration	100
13 Homeopathy registration	50
(b) Subsequent Visit Charges	(₹)
Subsequent-Antenatal	30
Subsequent-Gynaecology	30
Subsequent-Medicine	30
Subsequent-Surgery	30
Subsequent-Paediatrics	50
Subsequent – Dermatology	50
Subsequent – Dental	50
Subsequent – ENT	50
Subsequent – Ophthalmology	50

Subsequent – Orthopaedics	50
Subsequent – Homeopathy	50

B. Bed Charges	(₹)
General Ward	125 / per day
Non AC Cabin Single Bed	600 / per day
NON AC Cabin Double Bed	400 / per day
AC Cabin Single Bed	1000/- per day
AC Cabin Double Bed	600/- per day
Paediatric Ward Bed	300/- per day

C. Special Care Units	(₹)
Critical Care Unit	400/- per day - General Ward Patients Cabin Charges to Cabin Patients
Neonatal intensive care unit (NICU I)	600/- per day
Neonatal intensive care unit (NICU II)	600/- per day
Sick Baby Ward	400/- per Day

D	<u>Confinement</u>	
	Normal Delivery	2500/- per general Bed Patients 3500/- for cabin Patients
	Caesarean Section	5500/- for general bed patients 7000/- for cabin patients

E	INVESTIGATIONS :	
	<u>INVESTIGATIONS : BIOCHEMISTRY</u>	(₹)
	S.G.P.T	100
	S.G.O.T	100

Alkaline Phosphatase	100
L.F.T	450
Liver Enzyme	280
Sugar Fasting	70
G.T.T	300
Creatinine	100
Bilirubin (Total)	130
Total Protein	100
Albumin	80
Globulin	160
Glucose 6PD	220
HbA1c	450
Calcium	120
Sugar PP	70
Uric Acid	100
Sodium	200
Potassium	180
Chloride	200
G.S.T	70
Sugar Random	70
CRP	230
Na+K+Cl	500
PO ₂ +PCO ₂ +PH - Blood Gas	550
Na, K, Cl, HCO ₃ (Electrolise)	750
Blood gas with Electrolise	750
HCO ₃	200
Na	200

K	200
Blood Gas	550
Lipid Profile	550
R.B.S	70
Cholesterol	100
Vitamin D	1400
Urea	100
Urine 24 Hrs Micro Albumine	450
Urine for ACR	450
Amylase	500
Lipase	500
Vitamin D3	1400
<u>INVESTIGATIONS -Clinical Pathology :</u>	(₹)

Urine Reducing Substance	60
keton bodies	50
Stool Reducing Substance	60
Urine for AFB	50
Urine for budding yeast	60
24 Hrs Urine Creatinine Clearance	180
Urine for R/E/Albumin	60
24 Hrs Urine for Micro Protein Estmation	350
Stool for R/E	60
Stool for OBT	50

INVESTIGATIONS - CYTOLOGY :

AFB Stain	100
C.S.F Analysis	500

Gastric Lavege for Polymorph	50
FNAC	450
Pap Stain	300

INVESTIGATIONS - ENDOCRINOLOGY :

FT3	250
T3	230
T4	230
T3 T4 TSH	600
FT4	280
TSH	230
TSH Profile	600

INVESTIGATIONS - HAEMOTOLOGY :

Reticulocyte Count	80
Coombs Test - Indirect	130
Cord Blood	450
Coombs Test - Direct	130
ABO Grouping & RH Factor	150
Haemoglobin	50
P.C.V	40
Complete Haemogram	200
ESR	40
Hb%,TC DC,ESR	130
TC DC	60
TC	30
DC	30
Hb%,TC DC	110

MP,MF	60
Malaria Antigen	400
Peripheral Smear	60
BT CT	60
Platelets Count	70
CBC	200
MP	60
M.C.V	30
M.C.H	30
M.C.H.C	30
Hb%, TC DC, ESR, Plt Count	200
Hb - HPLC	750

INVESTIGATIONS - HISTOPATHOLOGY :

Medium Biopsy	600
Large Biopsy	1000
Small Biopsy	400
Large & Medium Biopsy	1600
Large & Small Biopsy	1400

INVESTIGATIONS - MICROBIOLOGY :

Umbilical Swab Culture & Sensitivity	450
ET culture & Sensitivity	450
Sputum AFB	100
Fluid for AFB	500
Throat Swap C/S	450
Sputum Analysis	120
Vaginal Swab Culture & Sensitivity	450

Urethral discharge for R/E & C/S	450
Sputum Culture & Sensitivity	450
Wound Swab Culture & Sensitivity	450
Eye Swab Culture & Sensitivity	450
Catheter tip culture & Sensitivity	450
Gram Stain/ZN Stain	120
Pus Culture & Sensitivity	450
Stool Culture & Sensitivity	450
Urine Culture & Sensitivity	450
Breast Milk For R/E & C/S	500
Fungus Culture	1000
Blood culture and sensitivity	1000
CSF For C/S	450
Vesicle Fluid for culture & sensitivity	450
<u>INVESTIGATIONS - SEROLOGY :</u>	
Serology of Dengue	2000
Dengue NS1 Antigen	1200
Dengue IgG Antibody	900
Dengue IgM Antibody	900
CRP	230
VDRL	100
HIV I & II	300
Mantox	140
Pregnancy Test	150
HbsAg	250
Hepatitis C Virus Antibody (H.C.V)	420
APTT	350

PT	140
MALARIA DOUBLE ANTIGEN	400
Widal Test	120
Dengue Rapid Test	900
Chikungunya	800

INVESTIGATIONS - SPECIALISED CHEMISTRY :

FSH	370
Prolactin	370
Beta HCG	520
LH	370
FERRITIN	750

INVESTIGATIONS - ULTRASONOGRAPHY

USG-Scrotal Region	1000
U.S.G. Both Eyes	1200
USG- Small Parts	1000
U.S.G - Dating Scan	800
U.S.G - Viability Scan	800
USG-Upper Abdomen Screening	500
USG-Left Knee	550
USG - Trans Vaginal	1500
USG of Both Breast - Bilateral	1500
USG of Breast - Unilateral	1000
U.S.G. Single Eye	800
USG-Anomaly Scan For Twin Baby -1	1500
USG-Anomaly Scan For Twin Baby - 2	1500
USG - Anomoly Scan - Twin	3000
USG - Fetal Profile - Twin	1500

USG-Colour Doppler-Fetus Study	1500
USG-Colour Doppler-Fetus Study (Twin)	2500
USG-Parotid Gland	1000
USG Breast	1000
USG - Chest	800
USG-Lower Abdomen	800
USG of Both Breast	1500
USG-Baby Brain	1000
USG-TVS Screening	1000
USG-Upper Abdomen	800
USG-Fetal Profile	800
USG- Thigh	1000
USG - Neck	1000
USG-Anomaly Scan	2000
USG-Whole Abdomen	1200
USG-Lower Abdomen Screening	500
USG-Whole Abdomen Screening	1000
USG- KUB	800
USG-TVS	1500
USG-Thyroid	1000

INVESTIGATIONS - COLOUR DOPPLER :

Doppler Study-Both Legs	2000
Colour Doppler-Foetus Study	1500
Colour Doppler Screening-Foetus Study	1200
Colour Doppler-Foetus Study For Twin Babv	2500
Colour Doppler - Single leg Vein	1500
Colour Doppler - Single leg Artery	1500

Colour Doppler - Single leg Vein & Artery	2500
Colour Doppler - Both legs Vein & Artery	4000
Colour Doppler-Fetus Study For Twin Baby - 1	1250
Colour Doppler-Fetus Study For Twin Baby - 2	1250

Other Investigations :

C.T.G	250
E.C.G	200

INVESTIGATIONS - ECHOCARDIOGRAPHY :

Echo-cardiography Screening	1000
Echocardiography with Colour Doppler	1500
Echo-cardiography 2D & M- Mode	1500
Paediatric-Echo	1800

INVESTIGATIONS – RADIOLOGY (DIGITAL X-RAY):

Portable Digital X- Ray (Bed Side) -Chest	350
Shoulder A.P & Lateral	400
Straight X- Ray Sinuses	200
XRy-Skull A.P.& Lateral	400
XRy - KUB	250
XRy-L.S. Spine A.P.& lateral	400
XRy - C. Spine A.P. & Lateral	400
XRy- Dorsal Spine A.P. & Lateral	400
XRy- Chest	200
X-Ray-Both Knee A.P. & Lateral	600
XRy- Knee A.P. & Lateral	300
XRy- Hand A.P. & Oblique	250
XRy- Wrist A.P. & Lateral	250
XRy- Elbow A.P. & Lateral	250
XRy-Both Forearm A.P. & Lateral	250

XRay- Foot A.P. & Oblique	250
XRay- Leg A.P. & Lateral	250
XRay-Femur A.P. & Lateral	250
XRay-Hand A.P. & Oblique	500
XRay-Wrist A.P. & Lateral	500
XRay-Elbow A.P. & Lateral	250
XRay-Forearm A.P. & Lateral	500
XRay-Foot Bilateral. & Oblique	500
XRay-Both Anklet A.P. & Lateral	500
XRay-Both Leg A.P. & Lateral	500
XRay- Femur A.P. & Lateral	500
X-Ray-Hip A.P. & Lateral	400
XRay-Whole Abdomen	250

OPERATION CHARGES :
OBSTETRICS & GYNAECOLOGY
ENDOSCOPIC SURGERY

<u>OPERATION NAME</u>	<u>Cabin</u>	<u>Gen.Bed</u>
	₹	₹
DIAGNOSTIC LAP DYE TEST + D/C	7,000	5,000
DIAGNOSTIC LAPAROSCOPY	5,000	4,000
DIAGNOSTIC HYSTEROSCOPY	5,000	4,000
DIAGNOSTIC HYSTEROSCOPY+ D/C+CX		
BIOPSY	8,500	7,000
DIAGNOSTIC HYSTEROSCOPY +D/C+CX		
CAUTERY	8,500	7,000
DIAGNOSTIC HYSTEROSCOPY + ENDO		
BIOPSY	9,000	7,500
DIAGNOSTIC HYSTEROSCOPY +		
POLYPECTOMY	7,000	5,000
DIAGNOSTIC HYSTEROSCOPY +		
POLYPECTOMY + D/C	8,500	5,000
LAPAROSCOPIC OVARIAN BIOPSY	10,000	8,500
LAPAROSCOPIC TUBAL LIGATION	5,000	4,000
LAPAROSCOPIC TUBECTOMY (BILATERAL)	5,000	4,000
LAP ADHESIOLYSIS	10,000	8,500
LAP OVARIAN CYSTECTOMY	10,000	8,500

LAP SALPINGECTOMY FOR ECTOPIC PREGNENCY	10,000	8,500
LAP HYSTERECTOMY (TLH)	10,000	8,500
LAP HYSTERECTOMY WITH LYMPH ADENECTOMY	14,500	11,000
LAP MYOMECTOMY	10,000	8,500
\VH (LAPAROSCOPY Asst.vaginal.Hyst.)	10,000	8,500
LAP HYSTEROSCOPY + D/C	7,000	5,000
LAPAROSCOPIC DYE TEST + HYSTEROSCOPY + D/C	8,500	6,000

OPERATION CHARGES :
OBSTETRICS & GYNAECOLOGY (OPEN)

<u>OPERATION NAME</u>	Cabin ₹	Gen.Bed ₹
ANTERIOR COLPORRHAPHY WITH OR WOTHOUT D & C	10,000	8,500
ANTERIOR COLPORRHAPHY & POSTERIOR COLPOPERINEORRHAPHY	14,000	11,000
POSTERIOR COLPE-PERINEORRHAPHY WITH OR WITHOUT DC	10,000	8,500
BILATERAL SALPINGECTOMY (Abdominal/Vaginal/POST PARTUM LIGATION/PUERPERAL LIGATION)	6,000	4,500
DRAINAGE AND REPAIR OF VULVAL HAEMATOMA	3,500	2,000
EXCISION OF SCAR ENDOMETRIOSIS	9,000	7,500
EXPLORATION OF WOUND/ABDOMINAL SINUS	6,000	4,500
FORCEPS APPLICATION UNDER GA	3,500	2,000
MANUAL REMOVAL OF PLACENTA	3,500	2,000
OOPHORECTOMY/SALPINGECTOMY	6,000	4,500
REMOVAL OF ECTOPIC PREGNENCY (UNILATERAL)	9,000	7,500
REMOVAL OF VAGINAL CYST	3,500	200
REPAIR OF URETHROCELE	9,000	7,500
SHIRODKAR'S/MCDONALDS/LASH'S OPERATION	3,500	2,000
CERVICAL BIOPSY & ENDOMETRIAL BIOPSY	5,500	3,000
D & C + POLYPECTOMY	5,500	3,000
D & C WITH CERVICAL BIOPSY	5,500	3,000
D & C WITH CERVICAL CAUTERY	5,500	3,000
D. C. PERINEORRHAPHY	9,000	7,500
DILATATION & CURETTAGE (D&C) WITH ENDOMETRICAL BIOPSY	5,500	3,000
DILATATION & EVACUATION (D&E)	3,500	2,000
DILATATION INSUFFLATION & CURETTAGE (D/C)	5,500	3,000
DRAINAGE OF BARTHOLIN ABSCESS (CYST) REMOVAL/	3,500	2,000
MARSUPIALIZATION/BARTHOLIN DRAINAGE OF HAEMATOMETRA/PYOMETRA	3,500	2,000
EXAMINATION UNDER ANAESTHESIA	3,500	2,000
FOTHERGILL'S OPERATION	9,000	7,500
LIGATURE OF INTERNAL ILLIAC VESSELS	9,000	7,500

OVARIOTOMY/OVARIAN CYSTECTOMY (UNILATERAL OR BILATERAL)	9,000	7,500
REMOVAL OF BROAD LIGAMENT CYST OR TUMOUR	9,000	7,500
REMOVAL OF ECTOPIC PREGNANCY (UNILATERAL/BILATERAL/SALPINGECTOMY/OOPHORECTOMY)	9,000	7,500
REMOVAL OF TUBO-OVARIAN MASS	9,000	7,500
REPAIR OF OLD COMPLETE PERINEAL TEAR	9,000	7,500
REPAIR OF RECTO-VAGINAL FISTULA	9,000	7,500
REPAIR OF VESICO VAGINAL FISTULA	9,000	7,500
VAGINOPLASTY	9,000	7,500
ABDOMINAL HYSTOECTOMY WITH OR WITHOUT SALPINGO-OOPHORECTOMY	9,000	7,500
MYOMECTOMY / CERVICAL MYOMA	9,000	7,500
ENDOMETRIOSIS-CONSERVATIVE OR RADICAL SURGERY	9,000	7,500
VAGINAL HYSTOECTOMY WITH OR WITHOUT PFR (WARD MAYO'S OPERATION)	9,000	7,500
ABDOMINAL HYSTOECTOMY WITH BILATERAL SALPINGO-OOPHORECTOMY WITH APPENDICECTOMY	12,000	10,000
REPAIR OF VAULT PROLAPSE (ABDOMINAL/VAGINAL)	9,000	7,500
WERTHEIM'S OPERATION/RADICAL HYSTERECTOMY	9,000	7,500
TOTAL ABDOMINAL/TOTAL VAGINAL PAN HYSTERECTOMY	9,000	7,500
EXPLORATION OF PERINEAL SINUS	9,000	7,500
EXPLORATION OF UTERUS	9,000	7,500
EXPLORATION OF VAGINAL VAULT	9,000	7,500
HYMENECTOMY	9,000	7,500
LYMPH NODE BIOPSY	3,500	2,000
POLYPECTOMY	3,500	2,000
REMOVAL OF LOOP FROM UTERINE CAVITY	3,500	2,000
SECONDARY PERINEAL/ABDOMINAL SUTURE	3,500	2,000

GENERAL SURGERY (open)

<u>OPERATION NAME</u>	<u>CABIN</u> (₹)	<u>GEN.BED</u> (₹)
EXCISION /BIOPSY OF LESIONS OF SKIN & SEB.TISSUE/MUSCLE/GANGLEON/SEB.CYST/LIPOMA/ SUP.SINUS AND ULCER	3,500	2,000
EXAMINATION UNDER ANAESTHESIA	3,500	2,000
FISTULECTOMY (LOW)	3,500	2,000
INCISION & DRAINAGE OF ABSCESS (BREASTS/GLUTEAL ABSCESS ETC.)	3,500	2,000
LYMPH NODE BIOPSY	3,500	2,000
ANAL STITCHING / FISSURECTOMY	3,500	2,000

REVIEW OF WOUND AND/OR DRESSING ON OT	3,500	2,000
SECONDARY SUTURE	3,500	2,000
AVULSION OF TOE NAIL	3,500	2,000
EXCISION OF FIBROADENOMA OF BREASTS	6,000	4,500
HAEMORRHOIDECTOMY (CONVENTIONAL)	6,000	4,500
APPENDICECTOMY	6,000	4,500
EXCISION OF PILES	3,500	2,000
REPAIR OF INGUINAL HERNIA (UNILATERAL)	9,000	7,500
REPAIR OF PARAUMBILICAL		
HERNIA/ADULT UMBILICAL	9,000	7,500
VENTRAL HERNIA/FEMORALHERNIA		
/INCISIONAL HERNIA		
REPAIR OF INGUINAL HERNIA (BILATERAL)	14,000	12,000
HAEMORRHOIDECTOMY (STAPLED)	6,000	4,500
THYROIDECTOMY	9,000	7,500
PAROTIDECTOMY (TOTAL)	9,000	7,500
MASTECTOMY (SIMPLE)	6,000	4,500
MASTECTOMY(RADICAL/MODIFIED)	9,000	7,500
OPEN CHOLECYSTECTOMY	9,000	7,500

GENERAL SURGERY (ENDOSCOPIC)

LAPAROSCOPIC APPENDICECTOMY	9,000	7,500
LAPAROSCOPIC CHOLECYSTECTOMY	10,000	8,500
LAPAROSCOPIC REPAIR OF HERNIA	10,000	8,500

PAEDIATRIC SURGERY

OPERATION name	(₹)
DERMOID CYST EXCISSION	3,500
INCISION AND DRAINAGE OF ABSCESS	
OF BABIES UNDER ANAESTHESIA	
3500	3,500
MEATOROMY/MEATOPLASTY	3,500
PAPILLOMA CHEEK AND TONGUE	3,500
PREPUCEOPLASTY/CIRCUMCISION	5,000
RELEASE OF TONGUE TIE	3,500
REMOVAL OF RECTAL POLYP	3,500
HERNIOTOMY – INGUINAL	5,000
ORCHIDOPEXY/ORCHIDECTOMY	5,000

DENTAL SURGERY & INSTRUMENTATIONS

Root Canal with Metal Cap	3,000
Root Canal treatment (Only)	2,000
Pulpotomy (Child RCT)	1,000
Denture Removal per tooth	250
Fixed Denture Metal Crown (per unit)	1,000
Fixed Denture Metal Ceromic (PFM)	2,000
Surgical Extraction	500
Post & Core	1,000
Cuspal Grinding	50
Simple metal cap	500
Bridge Catting	8,000
Zinc Oxide Filling	50
X-Ray-Teeth (IOPAR)	60
Extraction Of Teeth	100
Glass Inomer Cement Filling (GIC)	400
Composite Silver Filling	600
Root Canal with Crown (Metal Cap)	3,000
Root Canal with Crown (Metal Ceramic Cap)	4,000
Denture Removal per Teeth	250
Denture Removal Full(Upper + Lower)	6,000
Scaling	500
Crown Fixation per Teeth	200

PROCEDURE NAME	EYE SURGERY & INSTRUMENTATION (₹)
BIOMETRY	350
TONOMETRY	350
OCT - Both Eyes-R.N.F.L.	900
Fandus Photography	300
OCT-Single Eye	500
OCT - Both Eyes-Macula	900
DACRYOCYSTECTOMY	900
IRIDECTOMY	900
EXAMINATION UNDER ANAESTHESIA	900
MULTIPLE CHALAZION	900