

South East Central Railway

Expression of Interest

Advertisement for outsourcing of Pathological investigation and Radiological investigation for Sub Divisional Hospital, SEC Railway, BMY for Two years.

Chief Medical Superintendent/SEC Railway, Raipur is inviting Expression of Interest (EOI) from Pathological investigation Centre and Radiological investigation Centre of Bhilai & Charoda city for extending investigation facility to Railway beneficiaries on CGHS rate 2014 (NABL/Non-NABL) of Nagpur city.

After receipt of EOI Railway will short list the offers as per laid down criteria. The centre fulfilling the pre-laid criteria will be empanelled accordingly.

All willing Pathological investigation Centre and Radiological investigation Centre of Bhilai & Charoda are requested to submit (Either in person OR by registered post) EOI in the prescribed proforma within 21 days of publication of this advertisement in the office of Add. Chief Medical Superintendent/SEC Railway/SDRH/BMY Charoda on all working days between 11.00 hours to 17.00 hrs. The rate of investigations will be remain un-changed for further Two years and any revision of rate may be considered against revision of CGHS rates only.

The qualifying criteria, prescribed proforma for application and list of investigation tests are available in the office of Add.Chief Medical Superintendent/SEC Railway/BMY and these can be down loaded from the website of SECR in www.secr.indianrailways.gov.in from 25.08.2023 to 14.09.2023

(Dr. A.B.Kerketta)
Add. Chief Medical Superintendent
SEC Railway, BMY

दक्षिण पूर्व मध्य रेलवे

रुचि की अभिव्यक्ति

उप मंडल चिकित्सालय, दक्षिण पूर्व मध्य रेलवे, बी.एम.वाई में पैथोलॉजिकल टेस्ट एवं रेडियोलॉजिकल जॉच सुविधा का दो वर्षों के लिए आउटसोर्सिंग का विज्ञापन।

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मुख्य चिकित्सा अधीक्षक, दक्षिण पूर्व मध्य रेलवे, रायपुर के द्वारा भिलाई एवं चरोदा शहर के पैथोलॉजिकल टेस्ट एवं रेडियोलॉजिकल जॉच सेंटर से रेलवे हितग्राहियों के लिए नागपुर शहर के सी.जी. एच.एस. दर (एन.ए.बी.एल./नान-एन.ए.बी.एल.) 2014 में जॉच सेवाएं देने के लिए रुचि की अभिव्यक्ति आमंत्रित की जाती है।

रुचि की अभिव्यक्ति प्राप्त होने के बाद रेलवे द्वारा निर्धारित मापदंडों के अनुसार प्राप्त आफरो को सारांशित किया जाएगा। ऐसे केन्द्रों को जो सभी मानक मापदंडों को पूरा करेंगे उन्हें सूची में शामिल किया जाएगा। भिलाई एवं चरोदा शहर के सभी इच्छुक पैथोलॉजिकल टेस्ट एवं रेडियोलॉजिकल जॉच सेंटरों से निवेदन है कि वे अपने रुचि की अभिव्यक्ति को (व्यक्तिगत अथवा रजिस्टर्ड डाक द्वारा) निर्धारित प्रोफार्मा में इस विज्ञापन के प्रकाशित होने के 21 दिनों के भीतर, कार्यालय अपर मुख्य चिकित्सा अधीक्षक, दक्षिण पूर्व मध्य रेलवे, बी.एम.वाई में किसी भी कार्यालयीन दिवस में 11:00 बजे से 17:00 बजे तक जमा कर सकते हैं। सभी केन्द्र जो सूचीबद्ध किए जायेंगे उनके हेतु निर्धारित दर आगामी 02 वर्षों के लिए प्रभावी होंगे जो अपरिवर्तित रहेंगे एवं परिवर्तन केवल सी.जी.एच.एस. दर के बदलने पर ही संभव हो सकेगा।

निर्धारित मापदण्ड, आवेदन के प्रोफार्मा और जॉचों की सूची, कार्यालय अपर मुख्य चिकित्सा अधीक्षक, दक्षिण पूर्व मध्य रेलवे, बी.एम.वाई में उपलब्ध है तथा इसे द.पू.म.रेलवे के वेबसाइट www.secr.indianrailways.gov.in से दिनांक 25.08.2023 से 14.09.2023 तक डाउनलोड भी किया जा सकता है।

(डॉ. ए. बी. केरकेट्टा)
अपर मुख्य चिकित्सा अधीक्षक
दक्षिण पूर्व मध्य रेलवे
बी.एम.वाई

List of X-Ray Investigations for which EOI is invited:-

Investigation covered under CGHS Nagpur-2014 list: Updated on 03.05.2021

S. N.	Name of Investigation	CGHS Nagpur Code-2014	Available at centre		Offered Rate(s)
			Yes	No	
1	MRI- Orbit and brain	151			
2	Pure Tone Audiogram	232			
3	ECG	590			
4	HUTT	591			
5	2 D echocardiography	592			
4	3 D echocardiography	593			
5	Fetal Echo	594			
6	2 D TEE	595			
7	3 D TEE(Transoesophageal echo)	596			
8	Stress Echo- exercise	597			
9	Transvaginal sonography (TVS for Follicular monitoring /aspiration)	689			
10	Ultrasonography Level II scan/Anomaly Scan	708			
11	Fetal nuchal Translucency	709			
12	Fetal Doppler/Umbilical Doppler/Uterine Vessel Doppler	710			
13	Upper G.I. Endoscopy + Lower G.I. Endoscopy	1281			
14	Diagnostic endoscopy	1282			
15	Occlusal X-ray	1340			
16	OPG X-ray	1341			
17	USG for Obstetrics - Anomalies scan	1590			
18	Abdomen USG	1591			
19	Pelvic USG (prostate, gynae, infertility etc)	1592			
20	Small parts USG (scrotum, thyroid , parathyroid etc)	1593			
21	Neonatal head (Tranfontanellar)	1594			
22	Neonatal spine	1595			
23	Contrast enhanced USG	1596			
24	USG Breast	1597			
25	USG Hystero-Salpaingography (HSG)	1598			
26	Carotid Doppler	1599			
	Arterial Colour Doppler	1600			
27	Venous Colour Doppler	1601			
28	Colour Doppler, renal arteries/any other organ	1602			
29	USG guided intervention- FNAC	1603			
30	USG guided intervention - biopsy	1604			
31	USG guided intervention - nephrostomy	1605			
32	Abdomen AP Supine or Erect (One film)	1606			
33	Abdomen Lateral view (one film)	1607			
34	Chest P A view (one film)	1608			
35	Chest Lateral (one file)	1609			
36	Mastoids: Towne view, oblique view (3 films)	1610			
37	Extremities, bones & Joints AP & Lateral views (Two films)	1611			
38	Pelvis A.P. (One film)	1612			
39	T.M. Joints (one film)	1613			
40	Abdomen & Pelvis for K.U.B.	1614			
41	Skull A.P. & Lateral (2 films)	1615			
42	Spine A.P. & Lateral (2 films)	1616			
43	PNS view (1 film)	1617			
44	X-RAY CONTRAST STUDIES				
45	Barium Swallow	1618			
46	Barium Upper GI study	1619			
47	Barium Upper GI study (Double contrast)	1620			
48	Barium Meal follow through	1621			

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49	Barium Enema (Single contrast/double contrast)	1622			
50	Small bowel enteroclysis	1623			
51	ERCP (Endoscopic Retrograde Cholangio Pancreatography)	1624			
52	General :Fistulography/ Sinography/ Sialography /Dacrocystography/T-Tube cholangiogram/ Nephrostogram	1625			
53	Parcutaneous transhepatic cholangiography (PTC)	1626			
54	Intravenous Pyelography (IVP)	1627			
55	Micturating Cystourethrography (MCU)	1628			
56	Retrograde Urethrography (RGU)	1629			
57	Contrast Hystero-Salpingography ((HSG)	1630			
58	X ray- Arthrography	1631			
59	Cephalography	1632			
60	Myelography	1633			
61	Diagnostic Digital Substraction Angiography (DSA)	1634			
62	X-ray Mammography	1635			
63	MRI Mammography	1636			
64	Nerve condition velocity (at least 2 limbs)	1718			

Pathological Test
Investigation covered under CGHS Nagpur-2014 list: Updated on 03.05.2021

S.No.	Name of Investigation	CGHS Code	CGHS Rate Non-NABH /NABL 2014-Nagpur (in Rs.)	Available Yes/ No	Offered Rate (in Rs.)
1	Biopsy	165	460.00		
2	Biopsy Intraoral-Soft tissue	192	374.00		
3	Cervical Biopsy	653	1800.00		
4	Quadruple test	713	2000.00		
5	Urine routine- pH, Specific gravity, sugar, protein and microscopy	1383	35.00		
6	Urine-Microalbumin	1384	63.00		
7	Stoll routine	1385	31.00		
8	Stool occult blood	1386	22.00		
9	Postal coital smear examination	1387	30.00		
10	Semen analysis	1388	35.00		
11	Haemoglobin (Hb)	1389	18.00		
12	Total Leucocytic Count (TLC)	1390	28.00		
13	Differential Leucocytic Count (DLC)	1391	28.00		
14	E.S.R.	1392	25.00		
15	Total Red Cell count with MCV, MCH, MCHC, DRW	1393	32.00		
16	Complete Haemogram/CBC, Hb.RBC count and indices, TLC, DLC, Platelet, ESR, Peripheral smear examination	1394	135.00		
17	Platelet count	1395	48.00		
18	Reticulocyte count	1396	43.00		
19	Absolute Eosinophil count	1397	48.00		
20	Packed Cell Volume (PCV)	1398	13.00		
21	Peripheral Smear Examination	1399	39.00		
22	Smear for Malaria parasite	1400	41.00		
23	Bleeding Time	1401	32.00		
24	Osmotic fragility Test	1402	50.00		
25	Bone Marrow Smear Examination	1403	70.00		
26	Bone Marrow Smear Examination with iron stain	1404	225.00		
27	Bone Marrow Smear Examination and cytochemistry	1405	396.00		
28	Activated partial Thromboplastin Time (APTT)	1406	92.00		
29	Rapid test for malaria (card test)	1407	44.00		
30	WBC cytochemistry for leukemia –Complete panel	1408	99.00		
31	Bleeding Disorder panel- PT, APTT. Thrombin Time Fibrinogen, D-Dimer/FDP	1409	360.00		
32	Factor Assays-Factor VIII	1410	630.00		
33	Factor Assays-Factor IX	1411	680.00		
34	Platelet Function test	1412	50.00		
35	Tests for hypercoagulable states- Protein C, Protein S, Antithrombin	1413	400.00		
36	Tests for lupus anticoagulant	1414	150.00		
37	Test for Antiphospholipid antibody IgG, IgM (for cardiolipin and B2 Glycoprotein 1)	1415	450.00		
38	Thalassemia studies (Red Cell indices and Hb HPLC)	1416	560.00		
39	Tests for sickling /Hb HPLC)	1417	77.00		

40	Blood Group & RH Type	1418	30.00		
41	Cross match	1419	50.00		
42	Coomb's Test Direct	1420	90.00		
43	Coomb's Test Indirect	1421	100.00		
44	3 cell panel antibody screening for pregnant female	1422	153.00		
45	11 cells panel for antibody identification	1423	170.00		
46	HBs Ag	1424	92.00		
47	HCV	1425	128.00		
48	HIV I and II	1426	150.00		
49	VDRL	1427	43.00		
50	RH Antibody titer	1428	80.00		
51	Platelet Concentrate	1429	56.00		
52	Random Donor Platelet (RDP)	1430	128.00		
53	Single Donor Platelet (SDP – Apheresis)	1431	150.00		
54	Routine-H & E	1432	90.00		
55	Special stain	1433	65.00		
56	Immunohistochemistry (IHC)	1434	675.00		
57	Frozen section	1435	702.00		
58	Paraffin section	1436	309.00		
59	Pap Smear	1437	150.00		
60	Body fluid for Malignant cells	1438	150.00		
61	FNAC	1439	150.00		
62	Leukemia panel/ Lymphoma panel	1440	1382.00		
63	PNH Panel-CD55,CD59	1441	900.00		
64	Karyotyping	1442	1539.00		
65	FISH	1443	500.00		
66	Blood Glucose Random	1444	24.00		
67	24 hrs urine for Proteins, Sodium, creatinine	1445	50.00		
68	Blood Urea Nitrogen	1446	54.00		
69	Serum Creatinine	1447	55.00		
70	Urine Bile Pigment and Salt	1448	25.00		
71	Urine Urobilinogen	1449	20.00		
72	Urine Ketones	1450	30.00		
73	Urine Occult Blood	1451	35.00		
74	Urine total proteins	1452	18.00		
75	Rheumatoid Factor test	1453	100.00		
76	Bence Jones protein	1454	47.00		
77	Serum Uric Acid	1455	55.00		
78	Serum Bilirubin total & direct	1456	72.00		
79	Serum Iron	1457	90.00		
80	C.R.P.	1458	100.00		
81	C.R.P Quantitative	1459	144.00		
82	Body fluid (CSF/Ascitic Fluid etc.) Sugar, Protein etc.	1460	90.00		
83	Albumin	1461	18.00		
84	Creatinine clearance	1462	80.00		
85	Serum Cholesterol	1463	62.00		
86	Total Iron Binding Capacity	1464	80.00		
87	Glucose (Fasting & PP)	1465	47.00		
88	Serum Calcium – Total	1466	60.00		
89	Serum Calcium – Ionic	1467	44.00		
90	Serum Phosphorus	1468	60.00		

91	Total Protein Alb/Glo Ratio	1469	50.00		
92	IgG.	1470	225.00		
93	IgM.	1471	225.00		
94	IgA.	1472	250.00		
95	ANA.	1473	200.00		
96	Ds DNA	1474	350.00		
97	S.G.P.T.	1475	50.00		
98	S.G.O.T.	1476	50.00		
99	Serum amylase	1477	117.00		
100	Serum Lipase	1478	130.00		
101	Serum Lactate	1479	72.00		
102	Serum Magnesium	1480	90.00		
103	Serum Sodium	1481	50.00		
104	Serum Potassium	1482	50.00		
105	Serum Ammonia	1483	100.00		
106	Anemia Profile	1484	204.00		
107	Serum Testosterone	1485	150.00		
108	Imprint Smear From Endoscopy	1486	240.00		
109	Triglyceride	1487	75.00		
110	Glucose Tolerance Test (GTT)	1488	90.00		
111	Triple Marker	1489	720.00		
112	C.P.K.	1490	100.00		
113	Foetal Haemoglobin (HbF)	1491	85.00		
114	Prothrombin Time (P.T.)	1492	99.00		
115	L.D.H.	1493	100.00		
116	Alkaline Phosphatase	1494	60.00		
117	Acid Phosphatase	1495	78.00		
118	CK MB	1496	171.00		
119	CK MB Mass	1497	140.00		
120	Troponin I	1498	100.00		
121	Troponon T	1499	540.00		
122	Glucose Phosphate Dehydrogenase (G, 6PD)	1500	100.00		
123	Lithium	1501	130.00		
124	Dilantin (phenytoin)	1502	360.00		
125	Carbamazepine	1503	400.00		
126	Valproic acid	1504	300.00		
127	Feritin	1505	250.00		
128	Blood gas analysis	1506	120.00		
129	Blood gas analysis with electrolytes	1507	414.00		
130	Urine pregnancy test	1508	59.00		
131	Tests for Antiphospholipid antibodies syndrome	1509	252.00		
132	Hb A1 C	1510	130.00		
133	Hb Electrophoresis/ Hb HPLC	1511	100.00		
134	Kidney Function Test	1512	203.00		
135	Liver Function Test	1513	203.00		
136	Lipid Profile. (Total cholesterol, LDL, HDL, treiglycerides	1514	200.00		
137	Serum Iron	1515	90.00		
138	Total Iron Binding capacity	1516	81.00		

139	Serum Ferritin	1517	100.00		
140	Vitamin B12 assay	1518	250.00		
141	Folic Acid assay	1519	270.00		
142	Extended Lipid Profile. (Total cholesterol, LDL,HDL,treigylcerides, Apo A1,ApoB.Lp(a))	1520	536.00		
143	Apo A1.	1521	200.00		
144	Apo B.	1522	199.00		
145	Lp (a).	1523	401.00		
146	CD 3,4 and 8 counts	1524	170.00		
147	CD 3,4 and 8 percentage	1525	170.00		
148	LDL	1526	62.00		
149	Homocysteine.	1527	400.00		
150	HB Electrophoresis	1528	396.00		
151	Serum Electrophoresis	1529	198.00		
152	Fibrinogen	1530	165.00		
153	Chloride	1531	60.00		
154	Magnesium	1532	135.00		
155	GGTP.	1533	90.00		
156	Lipase	1534	215.00		
157	Fructosamine	1535	180.00		
158	β 2 microglobulin	1536	90.00		
159	Catecholamines.	1537	918.00		
160	Creatinine clearance	1538	120.00		
161	PSA- Total	1539	312.00		
162	PSA- Free	1540	375.00		
163	AFP.	1541	300.00		
164	HCG.	1542	260.00		
165	CA. 125.	1543	391.00		
166	CA 19,9.	1544	554.00		
167	CA 15.3.	1545	560.00		
168	Vinyl Mandelic Acid	1546	350.00		
169	Calcitonin	1547	450.00		
170	Carcioembryonic antigen (CEA)	1548	340.00		
171	Immunofluorescence	1549	150.00		
172	Direct (Skin and Kidney Disease)	1550	425.00		
173	Indirect (antids DNA Anti Smith ANCA)	1551	425.00		
174	VitD3 assay	1552	495.00		
175	Serum Protein electrophoresis with immunefixationelectrophoresis (IFE)	1553	300.00		
176	BETA-2 Microglobuline assay	1554	100.00		
177	Anti cycloictrullinated peptide (Anti CCP)	1555	450.00		
178	Anti tissuetransglutaminase antibody	1556	383.00		
179	Serum Erythropoetin	1557	425.00		
180	ACTH	1558	450.00		
HORMONES					
181	T3, T4, TSH	1559	200.00		
182	T3	1560	64.00		
183	T4	1561	64.00		
184	TSH	1562	90.00		

185	LH	1563	150.00		
186	FSH	1564	150.00		
187	Prolactin	1565	150.00		
188	Cortiso	1566	250.00		
189	PTH (Paratharmone)	1567	450.00		
190	C-Peptide	1568	297.00		
191	Insulin	1569	150.00		
192	Progesterone	1570	225.00		
193	17-DH Progesterone	1571	396.00		
194	DHEAS	1572	396.00		
195	Androstendione.	1573	600.00		
196	Growth Hormone	1574	340.00		
197	TPO.	1575	300.00		
198	Throglobulin	1576	300.00		
199	Hydatic Serology	1577	218.00		
200	Anti Sperm Antibodies	1578	380.00		
201	Qualitative	1579	1800.00		
202	Quantitative.	1580	1350.00		
203	Qualitative.	1581	1522.00		
204	HPV serology	1582	218.00		
205	Rota Virus serology	1583	130.00		
206	PCR for TB	1584	900.00		
207	PCR for HIV	1585	540.00		
208	Chlamydae antigen	1586	765.00		
209	Chlamydae antibody	1587	238.00		
210	Brucella serology	1588	230.00		
211	Influenza A serology	1589	849.00		
212	EEG/Video EEG	1716	298.00		
213	EMG (Electro myography)	1717	638.00		
214	Incremental response	1720	595.00		
215	SSEP (Somato sensory evoked potentials)	1721	638.00		
216	Poly somnography	1722	638.00		
217	Brachial plexus study	1723	638.00		
218	Muscle biopsy	1724	383.00		
219	ACHR anti body titre	1725	1848.00		
220	Anti MUSK body titre	1726	2340.00		
221	Serum COPPER	1727	500.00		
222	Serum ceruloplasmin	1728	450.00		
223	Urinary copper	1729	450.00		
224	Serum homocystine	1730	450.00		
225	Serum valproate level	1731	315.00		
226	Serum phenol barbitone level	1732	350.00		
227	Coagulation profile	1733	553.00		
228	Protein C, S anti thrombine – III	1734	2160.00		
229	Serum lactate level	1735	405.00		
230	Basic studies including cell count, protein, sugar, gram stain, India Ink preparation and smear for AFP	1736	240.00		
231	Special studies	1737	900.00		
232	PCR for tuberculosis/ Herpes simplex	1738	1200.00		

233	Bacterial culture and sensitivity	1739	200.00		
234	Mycobacterial culture and sensitivity	1740	200.00		
235	Fungal culture	1741	128.00		
236	Malignant cells	1742	64.00		
237	Anti measles antibody titre (with serum antibody titre)	1743	801.00		
238	Viral culture	1744	255.00		
239	Antibody titre (Herpes simplex, cytomegalo virus, flavivirus, zoster varicella virus)	1745	760.00		
240	Oligoclonal band	1746	1200.00		
241	Myelin Basic protein	1747	1871.00		
242	Lactate	1748	298.00		
243	Crypto coccal antigen	1749	1138.00		
244	D-xylase test	1750	850.00		
245	Fecal fat test/ fecal chymotrypsin/ fecal elastase	1751	850.00		
246	Breath tests	1752	1300.00		
247	H pylori serology for celiac disease	1753	500.00		
248	HBV genotyping	1754	2500.00		
249	HCV genotyping	1755	4387.00		
250	Urinary VMA	1756	1500.00		
251	Urinary metanephrine/Normetanephrine	1757	1138.00		
252	Urinary free catecholamine	1758	1521.00		
253	Serum catecholamine	1759	3400.00		
254	Serum aldosterone	1760	1012.00		
255	24 Hr urinary aldosterone	1761	920.00		
256	Plasma renin activity	1762	900.00		
257	Serum aldosterone/renin ratio	1763	1200.00		
258	Osmolality urine	1764	128.00		
259	Osmolality serum	1765	128.00		
260	Urinary sodium	1766	80.00		
261	Urinary Chloride	1767	43.00		
262	Urinary potassium	1768	80.00		
263	Urinary calcium	1769	80.00		
264	Thyroid binding globulin	1770	459.00		
265	24 hr. urinary free cotisole	1771	200.00		
266	Islet cell antebody	1772	750.00		
267	GAD antibody	1773	1197.00		
268	Insulin associated antibody	1774	404.00		
269	IGF-1	1775	1500.00		
270	IGF-BP3	1776	1485.00		
271	Sex hormone binding globulin	1777	1200.00		
272	USG guided FNAC thyroid gland	1778	348.00		
273	E2	1779	208.00		
274	Thyro globulin antibody	1780	587.00		

275	Kappa Lambda Light Chains, Free, Serum/ Serum free light chains (SFLC)	1781	3500		
276	Serum IGE Level	1782	300		
277	NT-Pro BNP	1783	1800		
278	HCV RNA Quantitative	1786	1500		
279	Tacrolimus	1787	2300		
280	Protein Creatinine Ratio, Urine	1788	120		
281	Fibroscan Liver	1789	1000		
282	HLA B27 (PCR)	1790	500		
283	Mantoux Test	1791	175		
284	Procalcitonin	1792	1800		
285	TORCH Test	1793	1120		
286	Anti –Smooth Muscle Antibody Test (ASMA)	1796	1241		
287	C ANCA-IFA	1797	1275		
288	P ANCA-IFA	1798	1275		
289	Angiotensin converting enzyme (ACE)	1799	850		
290	Extractable Nuclear Antigens (ENA) - Quantitative	1801	3910		
291	Chromogranin A	1802	4250		
292	Faecal calprotectin (fecal calprotectin)	1803	2320		
293	C3-COMPLEMENT	1804	552		
294	C4-COMPLEMENT	1805	552		
295	Genexpert Test	1806	880		
296	DJ stent removal	1807	7395		
297	H1N1 (RT-PCR)	1813	921		
298	Erythropoietin Level (Select CGHS rate code 1557 for approved rate)	1814	See code 1557		
299	Anti HEV IgM	1815	850		
300	Anti HAV IgM	1816	637		
301	HBsAg Quantitative	1817	552		
302	Typhidot IgM	1818	340		
303	Hepatitis B Core Antibody (HBcAb) Level (Hepatitis B Core IgM Antibody)	1819	408		
304	Anti HBs	1820	552		
305	Free Triiodothyronine (FT3)	1821	106		
306	Free Thyroxine (FT4)	1822	106		
307	Widal Test	1823	60		
308	Dengue Serology	1824	510		
309	Blood component charges - Whole Blood per Unit	1825	1450		
310	Blood component charges - Packed Red Cell per Unit	1826	1450		
311	Blood component charges - Fresh Frozen Plasma	1827	400		
312	Platelet Concentrate- Random Donor Platelet (RDP)	1828	400		
313	Blood component charges - Cryoprecipitate	1829	200		
314	Platelet Concentrate – Single Donor Platelet (SDP)- Apheresis per unit	1830	11000		

315	CCS Group A Officer of above 40 years of age –Male, Annual Health Check up	1831	2000		
316	CCS Group A Officer of above 40 years of age –female, Annual Health Check up	1832	2200		
317	Interleukin 6 (IL 6)	1833	1360		
318	Diurnal variation of IOP	1837	1275 per eye		
319	Silicone oil injection	1838	4250 per eye		
320	Epiretinal Membrane (ERM) Peeling	1839	5950 per eye		
321	Epiretinal Membrane (ERM) Removal	1840	2550 per eye		
322	Internal limiting membrane (ILM) peeling	1841	2550 per eye		
323	Punctoplasty	1842	5525 per eye		
324	Punctal plug(Collagen/silicone)	1843	3400 per eye		
325	Laser Trabeculoplasty Gonioplasty B/E	1844	13600 both eye		
326	Eye laser pulse therapy	1845	2975 per eye		
327	Glaucoma valve/Glaucoma Ahmed valve	1846	12750		
328	Malyugin Ring	1847	8500		

Investigation Not covered under CGHS Nagpur-2014 list:

S.No	Name of Investigation	Available Yes/ No	Offered Rate (in Rs.)
1	Clot Reaction Time		
2	L.E. Cell		
3	Vaginal Smear Examination		
4	Smear for Cryptosporidium		
5	Smear for P. Carcinei		
6	Vibro Cholera Culture/ Rapid Blood Culture/ Rapid AFB		
7	Allergy Test		
8	ASO		
9	Western Blot For – HIV		
10	Serum Bicarbonate		
11	Beta 2 Transferrin for CSF Leakage		
12	Adenosine D- Aminase (ADA) in Serum & Fluids		
13	Unconjugated Estriol (E 3)		
14	Leptospira IgG, IgM		
15	Chickengunia Antigen Test		
16	KOH Preparation (for Fungal)		
17	Gram Stain		
18	Blood Culture & Sensitivity : i) Mannual ii) Automated		
19	Urine Culture & Sensitivity, Semen C/s, CSF c/s, Sputum c/s, Throat Swab c/s, TB c/s, Other body Fluids c/s, Culture of OT/ICU Swab		
20	Dual Marker		
21	Estradiol/ Oestrogen (E 2)		
22	Tripal Marker		
23	AMH		
24	TB gold interferon		
25	ADH		
26	Tissue for HPE		
27	GFR		
28	APLA		
29	ACLA		
30	Ceruloplasmin		
31	NIPT		
32	C Peptide test		

CT Scan/MRI

List of CT/MRI Investigations for which EOI is invited:-

Investigation covered under CGHS Nagpur-2014 list: Updated on 03.05.2021

S. N.	Name of Investigation	CGHS NAGPUR Code-2014	Available at CT/MRI centre		Offered Rate(s)
			Yes	No	
1	CT Scan Head – Without Contrast	1637			
2	CT Scan Head – With Contrast (+/- CT angiography)	1638			
3	CT Scan Chest – Without Contrast (for lungs)	1639			
4	CT Scan Lower Abdomen (incl. Pelvis) With Contrast	1640			
5	CT Scan Lower Abdomen (incl. Pelvis) Without Contrast	1641			
6	CT Scan Whole Abdomen Without Contrast	1642			
7	CT Scan Whole Abdomen With Contrast	1643			
8	Triple Phase CT Abdomen	1644			
9	CT Scan Angiography abdomen/Chest	1645			
10	CT Scan Enteroclysis	1646			
11	CT Scan Neck Without Contrast	1647			
12	CT Scan Neck With Contrast	1648			
13	CT Scan Orbits Without Contrast	1649			
14	CT Scan Orbits With Contrast	1650			
15	CT Scan of Para Nasal Sinuses Without Contrast	1651			
16	CT Scan of Para Nasal Sinuses With Contrast	1652			
17	CT Scan Spine (Cervical, Dorsal, Lumbar, Sacral) Without Contrast	1653			
18	CT Scan Temporal bone Without Contrast	1654			
19	CT Scan –Dental	1655			
20	CT Scan Limbs Without Contrast	1656			
21	CT Scan Limbs With Contrast including CT angiography	1657			
22	CT Scan Guided intervention-FNAC	1658			
23	CT Scan Guided Trucut Biopsy	1659			
24	CT Scan Guided intervention-percutaneous catheter drainage/tube placement	1660			
25	MRI Head Without Contrast	1661			
26	MRI Head With Contrast	1662			
27	MRI Orbits Without Contrast	1663			
28	MRI Orbits With Contrast	1664			
29	MRI Nasopharynx and PNS Without Contrast	1665			
30	MRI Nasopharynx and PNS With Contrast	1666			
31	MRI for Salivary Glands with Sialography	1667			
32	MRI Neck Without Contrast	1668			
33	MRI Neck With Contrast	1669			
34	MRI Shoulder Without Contrast	1670			
35	MRI Shoulder With Contrast	1671			
36	MRI Shoulder both joints Without Contrast	1672			

Contd...2....

S. N.	Name of Investigation	CGHS NAGPUR Code-2014	Available at CT/MRI centre		Offered Rate(s)
			Yes	No	
37	MRI Shoulder both joints With Contrast	1673			
38	MRI Wrist single joint Without Contrast	1674			
39	MRI Wrist single joint With Contrast	1675			
40	MRI Wrist both joint Without Contrast	1676			
41	MRI Wrist both joint With Contrast	1677			
42	MRI knee Single joint Without Contrast	1678			
43	MRI knee Single joint With Contrast	1679			
44	MRI knee both joints Without Contrast	1680			
45	MRI knee both joints With Contrast	1681			
46	MRI Ankle Single Joint Without Contrast	1682			
47	MRI Ankle Single Joint With Contrast	1683			
48	MRI Ankle both Joints With Contrast	1684			
49	MRI Ankle both Joints Without Contrast	1685			
50	MRI Hip With Contrast	1686			
51	MRI Hip Without Contrast	1687			
52	MRI Pelvis Without Contrast	1688			
53	MRI Pelvis With Contrast	1689			
54	MRI Extremities With Contrast	1690			
55	MRI Extremities Without Contrast	1691			
56	MRI Temporomandibular – B/L With Contrast	1692			
57	MRI Temporomandibular – B/L Without Contrast	1693			
58	MRI Temporal Bone/Inner Ear With Contrast	1694			
59	MRI Temporal Bone/Inner Ear Without Contrast	1695			
60	MRI Abdomen Without Contrast	1696			
61	MRI Abdomen With Contrast	1697			
62	MRI Breast With Contrast	1698			
63	MRI Breast Without Contrast	1699			
64	MRI Spine Screening Without Contrast	1700			
65	MRI Chest Without Contrast	1701			
66	MRI Chest With Contrast	1702			
67	MRI Cervical/Cervico Dorsal Spine Without Contrast	1703			
68	MRI Cervical/Cervico Dorsal Spine With Contrast	1704			

Contd..3...

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69	MRI Dorsal/Dorso Lumbar Spine Without Contrast	1705			
70	MRI Dorsal/Dorso Lumbar Spine With Contrast	1706			
71	MRI Lumbar/Lumbo-Sacral Spine Without Contrast	1707			
72	MRI Lumbar/Lumbo-Sacral Spine With Contrast	1708			
73	Whole body MRI (For Oncological workup)	1709			
74	MRI Cholecysto-Pancreatography	1710			
75	MRI Angiography	1711			
76	MRI Enteroclysis	1712			
77	Dexa Scan Bone Densitometry - Two sites	1713			
78	Dexa Scan Bone Densitometry - Three sites (Spine, Hip & extremity)	1714			
79	Dexa Scan Bone Densitometry Whole body	1715			
80	TMT	1375			
81	TEE	1376			
82	CECT Chest	1784			
83	MRI-Prostate (Multi-parametric)	1785			
84	Intracoronary OCT (AIIMS Rates)	1794			
85	Fractional Flow Reserve (FFR) Wire cost (AIIMS Rates)	1795			
86	Endo bronchial Ultrasound (EBUS) - Trans bronchial needle aspiration (TBNA) -Using New Needle	1800			
87	Pulmonary Function Test (PFT) / (Spirometry with DLCO)	1808			
88	EUS (Endoscopic Ultrasound) guided FNAC (Using with Needle)	1809			
89	CT Urography	1810			
90	Video Laryngoscopy	1811			
91	CT Angio-Neck Vessels	1812			

Investigation not covered under CGHS Nagpur-2014 list (also in other CGHS list):

		Available at centre		Offered Rate(s)
		Yes	No	
1	3 D CT Scan Shoulder Joint			
2	3 D CT Scan Elbow Joint			
3	3 D CT Scan Wrist Joint			
4	3 D CT Scan Hip Joint			
5	3 D CT Scan Knee Joint			
6	3 D CT Scan Ankle Joint			
7	3 D CT Scan Foot			
8	3 D CT Scan Pelvis			
9	CT Scan Shoulder with Contrast			
10	CT Scan KUB with Contrast			
11	CT Scan KUB without Contrast			
12	CT Scan Upper Abdomen with Contrast			
13	CT Scan Upper Abdomen without Contrast			
14	CT Scan HIP Joint with Contrast			
15	CT Scan Pubic Bone with Contrast			
16	CT Scan Pubic Bone without Contrast			
17	CT Scan Thigh without Contrast			
18	CT Scan Knee joint with Contrast			
19	CT Scan Palet with Contrast			
20	CT Scan Palet without Contrast			
21	HRCT Abdomen			

**PROFORMA FOR MINIMUM QUALIFYING CRITERIA FOR EMPANELMENT of
PATHOLOGICAL & RADIOLOGICAL CENTRES**

S.N.	DESCRIPTION	YES/NO
01	Whether the centre is well equipped with newer technology equipment (list of available equipment to be provided)	
02	Whether valid registration/license from the Local administrative body available (documentary, proofs to be provided)	
03	Whether agreeing for extending facility at CGHS-2014 (NABH/Non NABH) rates of Nagpur city.	
04	If CGHS rates not available for certain tests whether agreeing for doing those tests at AIIMS rate/Government rate, if available.	
05	If the AIIMS or Government rates are not agreed to then the lowest quoted rate for a particular test if available at investigation centre will be accepted.	
06	Whether qualified pathologist with at least 3 years post PG degree (MD Radiology)/Post Diploma (DMRD) experience available in centre (No Tele reporting).	
07	Whether qualified Radiologist with at least 3 years post PG degree (MD Radiology)/Post Diploma (DMRD) experience available in centre (No Tele reporting).	
08	Whether qualified and trained laboratory technician available (Number & list of such technicians to be enclosed)	
09	Whether agreeing for providing manpower for collection of samples from Sub Divisional Hospital/SECR/BMY as per requirement and even during emergency.	
10	Whether the centre provided free Ambulance service for in-patient in case of CT/MRI	
11	Whether the centre is agreeing for mode of payment on monthly bill payment system	
12	Whether Pathological Centre deliver the report in duplicate to the Hospital in Person/Electronically at the earliest.	
13	Whether in case of CT/MRI Centre, the report with plates (Films) shall be delivered directly to the patient /Attendant in case of outpatients.	
14	If due to some unavoidable reasons any tests could not be done at the centre then the centre should agreeing for arranging that test done at some other centre without any additional cost & preferably on the same day without delay.	
15	Whether the Centre are agreeing for applicability of rates for a period of <u>Two Years</u> effective from the date of entering into a MoU. There will be no upward revision of rates during this period, however the revision of rates will be decided, if any as per CGHS guideline only.	
16	Whether empanelled with any Government Hospital/ public sector hospital or not (List may be provided)	
17	Whether NABL/NABH accredited or not (details to be provided)	
18	Whether CT/MRI Centre is approved by AERB (Atomic Energy Research Beuro)	
19	Report should be duly signed by authorized signatory of the pathological centre/CT-MRI Centre	
20	The centre should have complied with statutory requirement including that of pollution control & Bio medical waste management etc.	
21	Any other specific information	

PTO

::2::

Name of Pathological/Radiological/CT-MRI Centre:

Full Address:

Telephone No. : Landline :

Mobile:

FAX No.:

Name & Signature of
Authorized Signatory

(Official Stamp)

Note: The short listed participants will be informed about the date and time of inspection of their centre by duly constituted Committee telephonically.

**MINIMUM QUALIFYING CRITERIA FOR EMPANELEMENT OF PATHOLOGICAL & RADIOLOGICAL
(X-Ray/CT SCAN/MRI CENTRES) FOR SUB DIVISIONAL HOSPITAL/SECR/BMY**

1. The centre should be well equipped with newer technology equipment.
2. The Pathology Centre should have a qualified pathologist with at least 3 years post PG degree experience and also qualified and experienced laboratory technicians to carry out the pathological investigations.
3. The X-Ray/CT/MRI Centre should have a qualified Radiologist with at least 3 years Post PG Degree experience.
4. The centre must have valid registration license from the local administrative body for running the pathological centre.
5. The centre should agree extending investigation facility at CGHS-2014 (NABL/Non NABL) rates of Bhilai & Charoda city.
6. If CGHS rates are not available for certain tests the centre should agree for doing those tests, at AIIMS rates or Government Hospital rate, if available.
7. If the AIIMS or Government rates are not agreed to then the lowest quoted rate for a particular test, if available at investigation centre will be accepted.
8. The Pathological Centre shall deliver the report in duplicate to the Hospital in Person/Electronically at the earliest.
9. In case of X-Ray/CT/MRI Centre, the report with plates (Films) shall be delivered directly to the Hospital in case of inpatients and shall be delivered directly to the patient Attendant in case of outpatients.
10. The pathology centre has to provide manpower for collection of samples from the Sub Divisional Hospital/SECR/BMY as per requirement and also in case of emergency.
11. In case of X-Ray/CT/MRI the Centre has to provide free Ambulance service for in-patients.
12. In case X-Ray/CT/MRI/Pathological equipment is out of order it should be the responsibility of Centre to get it done at other centre without any addition cost to railways.
13. The rates will be applicable for a period of **Two years** effective from the date of entering into a MOU. There will be no upward revision of rate during the period. However the revision of rates will be decided if any as per CGHS guideline only.
14. The mode of payment will be on monthly bill payment system only.
15. The Sub Divisional Hospital, SEC Railway/BMY reserves the right to reject any or all the Expression of Interest without assigning any reason thereof.
16. The ACMS Office/SECR/BMY reserves the right to deal with proposal in any manner without assigning any reason for the same. The decision of Sub Divisional Hospital, SEC Railway/BMY in this regard shall be final.
17. X-Ray/CT/MRI CT/MRI Centre should be AERB (Atomic Energy Research Beauru) approved.

Signature

Name/ Designation

Official Seal