

# **NED UNIVERSITY OF ENGINEERING & TECHNOLOGY**

No. DR (Estab)/(1109)/1776

Dated: 26-02-2026

## **NOTIFICATION**

The University has revised the Pathological Laboratory Tests as well as X-ray and ECG charges (list attached) for recovery from the University employees w.e.f. 01-03-2026.

**REGISTRAR**

To:

**Principal Medical Officer**

Copy for information to:

- 1 Director Finance
- 2 Ag. Resident Auditor

### Revision of Rates of Pathological Lab Tests

Sr. No.	Test Name	Existing Test Charges for Employees	Existing Test Charges for Non-Entitled dependents	Revised Test Charges for Employees	Revised Test Charges for Non-Entitled dependents
1	CBC/CP	150/-	200/-	250/-	300/-
2	ESR	100/-	120/-	100/-	120/-
3	MP	100/-	120/-	100/-	120/-
4	Heamoglobin	100/-	120/-	250/-	300/-
5	Blood Sugar Manual	100/-	120/-	150/-	200/-
6	Serum Urea	110/-	130/-	250/-	300/-
7	Serum Creatinine	110/-	130/-	250/-	300/-
8	Lipid Pofile	500/-	600/-	1000/-	1200/-
9	Cholesterol	170/-	200/-	250/-	300/-
10	LFT	250/-	300/-	450/-	500/-
11	SGPT	100/-	120/-	150/-	200/-
12	ALK Phos	100/-	120/-	150/-	200/-
13	Uric Acid	130/-	150/-	250/-	300/-
14	Urine D/R	100/-	120/-	150/-	200/-
15	Stool D/R	100/-	120/-	100/-	120/-

**List of Revision of Rates X-ray tests / charges.**

Sr. No.	Name	Specifications	Old Rate	New Rate
1	Skull	Anterior Posterior & Lat. (Two Views)	360	450
2	PNS	Water's View	180	250
3	Mastiod	Both Sides	360	450
4	Nasal Bone	Both Sides (One Film)	240	300
5	Mandible	Ap / Lateral (Two Views)	240	450
6	Cervical Spine	Ap / Lateral (Two Views)	360	450
7	Thoracic (Dorsal) Spine	Ap / Lateral (Two Views)	360	500
8	Lumbo Sacral Spine	Ap / Lateral (Two Views)	360	500
9	Coccyx Spine	Ap / Lateral (Two Views)	360	500
10	Shoulder Joint	Ap / Lateral (Two Views)	360	450
11	Clavicle	Ap / Lateral (One Film)	180	250
12	Humorus	Ap / Lateral (Two Views on One Film)	240	300
13	Elbow Joint	Ap / Lateral (Two Views on One Film)	240	300
14	Forearm	Ap / Lateral (Two Views on One Film)	240	300
15	Wrist Joint	Ap / Lateral (Two Views on One Film)	240	300
16	Hand	Ap / Lateral (Two Views on One Film)	240	300
17	Chest	P.A View	180	250
18	Chest	AP / Lateral (Two Views)	360	500
19	Abdomen	Supine	180	250
20	Abdomen	Errect Posture	180	250
21	KUB	Plain	180	250
22	Pelvis	Ap / View (One Film)	180	250
23	Hip Joint	Ap / Lateral (Two Views)	360	500
24	Femur (Tight Long Bons)	Ap / Lateral (Two Views One Film)	360	500
25	Knee Joint	Ap / Lateral (Two Views on One Film)	240	300
26	Both Knee Joint	Ap / Lateral (Four Views on Two Fims)	480	600
27	Leg (Tibia & Fibula)	Ap / Lateral (Two Views on One Film)	240	300
28	Ankle Joint	Ap / Lateral (Two Views on One Film)	240	300
29	Foot	Ap / Lateral (Two Views on One Film)	240	300
30	Heel (Calcanium)	Axil / Lateral (Two Views on One Film)	240	300

### Revision of Rates of ECG Charges

Sr. No.	Test Name	Existing Test Charges for Employees	Revised Test Charges for Employees	Existing Test Charges for Non-Entitled dependents	Revised Test Charges for Non-Entitled dependents
1	ECG	60/-	200/-	75/-	250/-