

IMPLEMENTATION INSTRUCTIONS : REVISED ECHS RATES

1. Reference :-

(a) Central Organisation ECHS letter No B/49771/AG/ECHS/Empanelment dated 05 Dec 2003.

(b) Central Organisation ECHS letter No B/49773/AG/ECHS/CGHS dated 24 Aug 2010 (vide which MoD ID No 22A(48)/2007/US/WE/D(Res) dated 19 Aug 2010 was forwarded to all).

2. Rates for various empanelled hospitals have been revised for Delhi and five other cities presently and differentiated for NABH Accredited Hospitals, Non NABH Hospitals and Super Speciality Hospitals by CGHS.

Super Speciality Hospitals

3. Central Organisation of ECHS has received requests for clarification as to which hospitals will be categorised as "super-speciality hospitals" and which hospitals can charge rates fixed for Super-speciality hospitals. It has been clarified by the Ministry of Health and Family Welfare vide their Office Memo No. S.11011/23/2009-CGHS D.II/Hospital Cell (Part I) dated 13 Sep 2010 for Delhi that the entitlement of hospitals to super-speciality rates will not be, because hospitals perceive themselves to be super-speciality hospitals, but subject to their fulfilling the eligibility conditions for being classified as super-speciality hospitals. These are :-

(a) Hospitals with 300 or more beds.

(b) Should be accredited by NABH or its equivalent such as Joint Commission International (JCI) of USA, ACHS of Australia or by any other accreditation body approved by International Society for Quality in Health Care (ISQua).

(c) Should have ECHS empanelled treatment facilities in at least three of following Super Specialities in addition to Cardiology, Cardiothoracic Surgery and Specialised Orthopaedic Treatment facilities that include Joint Replacement Surgery :-

(i) Nephrology and Urology (including Renal Transplantation).

(ii) Endocrinology.

(iii) Neuro Surgery.

(iv) Gastroenterology and GI-Surgery including Liver Transplantation.

(v) Oncology-(Surgery Chemotherapy and Radiotherapy).

4. ECHS beneficiaries have, so far, been given the option to get themselves treated in any empanelled hospital of their choice. However, in view of the increased outgo on getting treatment in Super Speciality Hospitals, it has now been decided that ECHS beneficiaries desirous of getting treated in Super Speciality hospitals, in non emergency conditions, prior approval of the concerned Regional Centres would have to be obtained.

5. List of hospitals which meet the above criteria at Delhi, Mumbai, Bangalore, Hyderabad, Kolkata and Chennai and can be qualified as Super Speciality is at **Appendix 'A'**.

6. Further, Station Headquarters be instructed to obtain documentary proof from the empanelled hospitals and submit the same for categorization of the hospitals as NABH accredited hospitals and Superspeciality hospitals by 31 Jan 2011.

Zonal Jurisdiction of CGHS Rates

7. Zonal jurisdiction of CGHS rates for ECHS was laid down vide this Organisation letter No B/49771/AG/ECHS/Empanelment dated 05 Dec 2003. Revised Zonal Jurisdiction of rates is at **Appendix 'B'** to this letter. (Appendix 'D' of this Organisation letter No B/49771/AG/ECHS/Empanelmentt dated 05 Dec 2003 is hereby superseded).

Package Rates

8. Package rate shall mean and include lump sum cost of inpatient treatment/ day care/diagnostic procedure for which a ECHS beneficiary has been permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge including (but not limited to) the following :-

- (a) Registration charges.
- (b) Admission charges.
- (c) Accommodation charges including patients diet.
- (d) Operation charges.
- (e) Injection charges.
- (f) Dressing charges.
- (g) Doctor/consultant visit charges.
- (h) ICU/ICCU charges.
- (j) Monitoring charges.
- (k) Transfusion charges.

- (l) Anesthesia charges.
- (m) Operation Theatre charges.
- (n) Procedure charges/Surgeon's fee.
- (o) Cost of surgical disposables and all sundries used during hospitalization.
- (p) Cost of medicines.
- (q) Related routine and essential investigations.
- (r) Physiotherapy charges etc.
- (s) Nursing Care and charges for its services.

9. Cost of implants/stents/grafts is reimbursable in addition to package rates as per ceiling rates of CGHS for Implants/stents/graft or as per actual, in case there is no CGHS prescribed ceiling rates. The CGHS ceiling rates presently applicable are given at **Appendix 'C'** (these rates will be valid till the same are revised by CGHS).

10. Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.

11. The hospitals empanelled under ECHS shall not charge more than the package rates/rates negotiated in MOA whichever is lower.

12. Package rates envisage upto a maximum duration of indoor treatment as follows :-

- (a) 12 days for Specialised (Super Specialities) treatment.
- (b) 7 days for other Major Surgeries.
- (c) 3 days for Laparoscopic surgeries/normal deliveries.
- (d) 1 day for day care/minor (OPD) surgeries.

13. However, if the beneficiary has to stay in the hospital for his/her recovery for a period more than the period covered in package rate, in exceptional cases, supported by relevant medical records and certified as such by hospital, the additional reimbursement shall be limited to accommodation charges as per entitlement, investigations charges at approved rates and doctors visit charges (not more than 2 visit per day per visit by specialists/consultants and cost of medicines for additional stay).

14. No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

15. The package rates are for semi-private ward.

16. The ECHS beneficiaries taking treatment in the empanelled hospitals will be entitled for reimbursement/treatment on credit as per the package rates/rates as per MOA whichever is lower. The package rates are for semi-private ward. If the beneficiary is entitled for general ward there will be a decrease of 10% in the rates. For private ward entitlement there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test per se does not require admission to hospital.

17. A hospital empanelled under ECHS whose normal rates for treatment procedure/test are lower than ECHS prescribed rates shall charge as per the rates charged by them for that procedure/treatment from a non ECHS beneficiary and will furnish a certificate to the effect that the rates charged from ECHS beneficiaries are not more than the rates charged by them from non ECHS beneficiaries.

18. During in patient treatment of the ECHS beneficiary, the hospital will not ask the beneficiary or his/her attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the ECHS which includes the cost of all the items.

19. In case of treatment taken in emergency in any non-empanelled private hospitals, reimbursement shall be considered by competent authority at ECHS prescribed packages/rates only.

20. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only at 50% of charges for minor procedure.

21. Any legal liability arising out of such services, responsibility solely rests on the hospital and shall be dealt with by the concerned empanelled hospital themselves.

Definition of Wards

22. **Private Ward.** Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishing like wardrobe, dressing table, bed-side table, sofa set, carpet etc as well as a bed for attendant. The room has to be air-conditioned.

23. **Semi Private Ward.** Semi private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

24. **General Ward.** General ward is defined as halls that accommodate four to ten patients.

25. Normally treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

Entitlement of Ward

26. ECHS beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Rank at the time retirement. The entitlement is as follows :-

Ser	Rank at the time or retirement	Entitlement
(a)	NCOs & below of Army & equivalent in Navy & Air Force	General Ward
(b)	JCOs in Army & equivalent in Navy & Air Force	Semi Private Ward
(c)	Officers of Army, Navy and Air Force	Private Ward

MOA with Empanelled Hospitals

27. All Station Headquarters where rates have changed be instructed to sign fresh MsOA with their respective empanelled hospitals with fresh negotiated rates as per Appendix 'B' to this letter. Rates in no case shall exceed CGHS rates. This must be done earliest but not later than two months from the date of issue of this letter. The rates for NABH accredited hospitals will be supported by documentary proof. For Station Headquarters where rates have not been changed/affected presently, it is the responsibility of the concerned Station Headquarters to **negotiate and sign fresh MsOA within two months of the declaration of the revised CGHS rates as applicable as per letters at para 1 above.**

28. Kindly ensure speedy dissemination to all concerned in your AOR.

Sd/- X X X

MD ECHS

Authority:B/49773/AG/ECHS/Rates/Policy.10 Jan 2011

Appendix 'A'

(Refer to para 5 of Central Organisation
ECHS letter No B/49773/AG/ECHS/Rates/
Policy dated ___ Jan 2011)

**LIST OF HOSPITALS MEETING CRITERIA FOR
SUPERSPECIALITY HOSPITAL**

Ser	Name of Hospitals	Cities
1.	Kailash Hospital	Noida
2.	Sir Gangaram Hospital	Delhi
3.	Indraprastha Apollo Hospital	Delhi
4.	Wockhard Hospital	Mumbai
5.	Manipal Hospital	Bangalore
6.	Narayana Hridayalaya	Bangalore
7.	Apollo Hospital	Hyderabad
8.	Medvin Hospital	Hyderabad
9.	Apollo Hospital	Chennai
10.	Sri Ramachandra Medical Centre	Chennai
11.	Apollo Gleaneagles Hospital	Kolkata

Appendix 'B'

(Refer to para 8 of Central Organisation
ECHS letter No B/49773/AG/ECHS/Rates/
Policy dated ___ Jan 2011)

**ZONAL JURISDICTION – RATES FOR REIMBURSEMENT/PAYMENT OF
MEDICAL EXPENSES**

Ser	State	CGHS Rates Applicable	Remarks
<u>States</u>			
1.	Jammu & Kashmir	Jammu	Rates applicable for Chandigarh till promulgation of CGHS Jammu rates.
2.	Himachal Pradesh	Jammu	-do-
3.	Punjab	Chandigarh	CGHS Delhi 2010 rates till promulgation of second revision CGHS Chandigarh rates
4.	Haryana	Chandigarh	-do-
5.	Delhi and NCR Region	Delhi	Delhi 2010 CGHS rates promulgated vide MOH & FW/OM MOH & FW office memorandum No S 11011/23/2009-CGHS D-II/Hospital Cell (Part I) dated 17 Aug 2010.
6.	Uttar Pradesh	Lucknow (except districts under Allahabad, Meerut, Kanpur Area)	Pre 2006 rates applicable for Lucknow till promulgation of second revision of Lucknow rates by CGHS.
		Allahabad (except districts under Lucknow, Meerut, Kanpur)	Pre 2006 rates applicable for Allahabad till promulgation of second revision of Allahabad rates by CGHS.
		Meerut (except districts under Lucknow, Allahabad, Kanpur)	Pre 2006 rates applicable for Meerut till promulgation of second revision of Meerut rates by CGHS.
		Kanpur (except districts under Lucknow, Meerut, Allahabad)	Pre 2006 rates applicable for Kanpur till promulgation of second revision of Kanpur rates by CGHS.
7.	Uttaranchal	Dehradun	Rates applicable for Lucknow till promulgation of second revision of Dehradun rates by CGHS.

Ser	State	CGHS Rates Applicable	Remarks
8.	Bihar	Patna	Pre 2006 rates applicable for Patna till promulgation of second revision of Patna rates by CGHS.
9.	Jharkhand	Ranchi	Pre 2006 rates applicable for Ranchi till promulgation of second revision of Ranchi rates by CGHS.
10.	Orissa	Bhubaneshwar	Rates applicable for Ranchi till promulgation of second revision of Bhubaneshwar rates by CGHS.
11.	West Bengal	Kolkata	Kolkata 2010 CGHS rates promulgated vide MOH & FW/OM MOH & FW office memorandum No S 11011/23/2009-CGHS D-II/Hospital Cell (Part V) issued in Aug 2010.
12.	Sikkim	Kolkata	Rates as applicable for Kolkata.
13.	Assam	Guwahati	Kolkata 2010 CGHS rates till promulgation of second revision of Guwahati rates by CGHS.
14.	Meghalaya	Shillong	Rates as applicable for Guwahati till promulgation of CGHS Shillong rates.
15.	Mizoram	Guwahati	Rates as applicable for Guwahati.
16.	Tripura	Guwahati	-do-
17.	Manipur	Guwahati	-do-
18.	Nagaland	Guwahati	-do-
19.	Arunachal Pradesh	Guwahati	-do-
20.	Madhya Pradesh	Bhopal	Rates applicable for Jabalpur till promulgation of second revision of Bhopal rates by CGHS.
		Jabalpur	Pre 2006 rates applicable for Jabalpur till promulgation of second revision of Jabalpur.

Ser	State	CGHS Rates Applicable	Remarks
21.	Chattisgarh	Jabalpur	Pre 2006 rates applicable for Jabalpur till promulgation of second revision of Jabalpur rates by CGHS.
22.	Rajasthan	Jaipur	Pre 2006 rates applicable for Jaipur till promulgation of second revision of Jaipur rates by CGHS
23.	Gujarat	Ahmedabad	Pre 2006 rates applicable for Ahmedabad till promulgation of second revision of Ahmedabad by CGHS.
24.	Maharashtra	Mumbai & Thane (except districts under Pune, Nagpur Area)	Mumbai 2010 CGHS rates promulgated vide MOH & FW/OM MOH & FW office memorandum No S 11011/23/2009-CGHS D-II/Hospital Cell (Part II) dated 17 Sep 2010.
		Pune (except districts under Mumbai, Thane and Nagpur)	Pre 2006 rates applicable for Pune till promulgation of second revision of Pune rates by CGHS.
		Nagpur (except districts under Mumbai, Thane and Pune)	Pre 2006 rates applicable for Nagpur till promulgation of second revision of Nagpur rates by CGHS.
25.	Goa	Pune	Rates as applicable for Pune.
26.	Karnataka	Bangalore	Bangalore 2010 CGHS rates promulgated vide MOH & FW/OM MOH & FW office memorandum No S 11011/23/2009-CGHS D-II/Hospital Cell (Part III) issued in Aug 2010.
27.	Kerala	Trivandrum	Pre 2006 rates applicable for Trivandrum till promulgation of second revision of Trivandrum rates by CGHS.

Ser	State	CGHS Rates Applicable	Remarks
28.	Tamil Nadu	Chennai	Chennai 2010 CGHS rates promulgated vide MOH & FW/OM MOH & FW office memorandum No S 11011/23/2009-CGHS D-II/Hospital Cell (Part VI) issued in Aug 2010.
29.	Andhra Pradesh	Hyderabad	Hyderabad 2010 CGHS rates promulgated vide MOH & FW/OM MOH & FW office memorandum No S 11011/23/2009-CGHS D-II/Hospital Cell (Part IV) dated 16 Sep 2010.
<u>Union Territory</u>			
30.	Chandigarh	Chandigarh	Rates as applicable for Chandigarh
31.	Andaman & Nicobar Islands	Chennai	Rates as applicable for Chennai.
32.	Puducherry	Chennai	-do-
33.	Lakhsadeep Islands	Trivandrum	Rates as applicable for Trivandrum.
34.	Daman Diu	Mumbai	Rates as applicable for Mumbai
35.	Dadra & Nagar Haveli	Mumbai	-do-

Appendix 'C'

(Refer to para 10 of Central Organisation ECHS letter No B/49773/AG/ECHS/Rates/Policy dated ___ Jan 2011)

CGHS CEILING RATES FOR IMPLANTS**Cardiology Implantation Devices**

1. The ceiling rates for Cardiology Implantation Devices are as under :-

Name of the item	Maximum Ceiling Rate
(a) Coronary stent	
(i) Cypher stent	Rs.95,000/- + VAT
(ii) Taxus Stent	Rs.67,300/- + VAT
(iii) Endeavor	Rs.85,000/- + VAT
(iv) Xience VEECSS	Rs.95,000/- + VAT
(v) Yukon Choice	Rs.55,000/- + VAT
(vi) Bare Metal Stent	Rs.50,000/- (inclusive all)
(b) Rotablator	Rs.50,000/-
(c) Pacemaker (Single Chamber)	
(i) Without rate response	Rs.37,000/-
(ii) With rate response	Rs.65,000/-
(d) Pacemaker (Dual Chamber)	Rs1,15,500/-

2. Prior approval to be obtained as per Central Org letter No B/49773/AG/ECHS dated 12 May 2006. The reimbursement for implants will be as per **ceiling rates above or actual cost whichever is lesser.**

3. A maximum of three Coronary stents shall be permitted of which not more than two shall be of Drug Eluting Stents (DES). However, DES shall be permitted only for patients where re-stenosis will involve high risk to patient's life, i.e

- (a) Osteal/Proximal LAD lesions.
- (b) Stenosis of a Coronary artery, which is giving collaterals to another blocked artery, thus supplying a large area of myocardium.
- (c) Stenting of restenotic lesions after previous angioplasty.
- (d) Permission shall be granted as per laid down procedure.

4. If a beneficiary under ECHS has been implanted by any other non approved drug coated stent or a drug eluting stent is implanted in conditions other than those mentioned above, reimbursement shall be limited to the cost of Bare metal stent.

5. If a non-approved drug eluting stent (DES) is implanted or a drug eluting stent (DES) is implanted in conditions other than those mentioned above in an empanelled hospital and no written informed consent was obtained from the beneficiary, that he/she would bear the difference in cost between the DES and Bare Metal Stent and the hospital has charged this amount from the beneficiary. the additional amount shall be deducted from the pending bills of hospitals and shall be paid to the beneficiary.

6. It is essential for the empanelled hospital to quote the Batch number when a coronary stent of any type (Ordinary metal/Drug Eluting stent) is implanted in the case of a beneficiary under ECHS. In addition to this the outer pouch of the stent packet alongwith the sticker on it on which details of the stent are printed alongwith invoice shall also be enclosed with the medical bills for claiming reimbursement from the Govt. In case the private empanelled hospital has not given the batch number and or outer pouch of the stent (s) in a particular case, the cost for stents will not be reimbursed (for reimbursement claims). In case of empanelled hospitals, the bills without supporting documents as above will NOT be accepted.

Neuro Implant

7. The ceiling rates for Neuro Implant are as under :-

Name of the item	Ceiling Rate	Cost of Battery
DBS Implants (Including MER)	Rs. 3,60,000/-	Rs. 2,50,000/-
Intra Thecal Pumps (Intra Thecal Beclofen Pump, Intra Thecal Morphine Pump)	Rs. 2,62,000/-	Rs. 2,25,000/-
Spinal Cord Stimulator	Rs. 2,62,000	Rs. 2,00,000

8. Prior approval to be obtained as per Central Org letter No dated 12 May 2006. Original Invoice alongwith the warranty/Implant stickers to be submitted alongwith claims. The reimbursement/payments for implants will be as per ceiling rates above or actual cost whichever is lesser.

9. **Guidelines.**

(a) **DBS Implant.** The patient should be a case of idiopathic Parkinsonism resistant to conservative treatment. ECHS/patient shall be informed in writing by treating specialist of the cost of implant and the efficacy of the treatment.

(b) **Intra Thecal Pumps (Intra Thecal Beclofen Pump, Intra Thecal Morphine Pump)/Spinal Cord Stimulator.** All conservative treatment procedures have failed and the diagnosis was confirmed. Treating specialist shall certify that there is reasonable chance of survival of terminally ill patient. Therapeutic trials shall be conducted and recommendation should be based on positive therapeutic trials. The treating specialist shall certify as such in writing. ECHS/patient shall be informed in writing by treating specialist of the cost of implant and the efficacy of the treatment.

10. **Warranty.** The company offers limited warranty for two yrs from date of Implantation to provide free replacement in the case of battery failure or if malfunctioning of the device is reported by the concerned Physician. The company shall also supply all the implants with not more than 1/6 of the life of battery exhausted.

11. **Life/Replacement of Batteries**

(a) Life of Battery is 3-5 years in case of DBS Implants and Spinal cord stimulator depending on parameters selected for stimulation and usage and up to 7 years in case of Intrathecal Infusion pump.

(b) Replacement of Battery before 4 years may be permitted in exceptional cases on the basis of justification by the treating specialist and shall be considered on a case to case basis by Central Organisation ECHS.

Hip Knee Implants

12. The ceiling rates for Hip Knee Implants are as under :-

Name of the item	Maximum Ceiling Rate
Knee Implant	Rs. 60,000/- + the cost of bone cement Rs.5,000/-
Hip Implant	Rs.35,000/- + the cost of Bone cement Rs.5,000/-

13. The treating orthopaedic specialist shall issue a certificate to the effect that the implant has been implanted successfully and is functioning satisfactorily.

14. Invoice alongwith the Implant stickers will be submitted alongwith bills/claims. The reimbursement/payments for implants will be as per **ceiling rates above or actual cost whichever is lesser.**

IOL

15. The ceiling rates for IOL are as under :-

Name of the item	Maximum Ceiling Rate
Hydrophobic Foldable IOL	Rs.5,000/-
Silicon Foldable IOL	Rs.3,600/-
Hydrophilic Acrylic Lens	Rs.5,800/-
PMMA IOL	Rs. 490/-

16. The ceiling rates mentioned above for different types of IOL implants to be used will be as per actual expenditure or the rates mentioned whichever is less and will be reimbursable in addition to the package rates for cataract surgery procedure.

17. The reimbursement at the above mentioned ceiling rates will be done as per the rates fixed for the various IOL mentioned above and the IOL actually used in the surgery. It is mandatory for the operating surgeon of all private empanelled hospital/ECHS beneficiaries to attach the empty IOL sticker, bearing the signature and stamp of the operating surgeon on it, alongwith the bill in support of the type of IOL used, containing its batch number. In the event of the private empanelled hospital not giving the batch number and/or empty IOL sticker in a particular case, the cost for IOL will not be reimbursed (for reimbursement claims). In case of empanelled hospitals, the bills without supporting documents as above will NOT be accepted.

Cochlear Implant Surgery

18. The ceiling rate for Cochlear Implant Surgery is Rs 5,35,000/- (Rupees five lacs and thirty five thousands only).

19. The best results are achieved if cochlear implants take place between the age of 1-5 years. Hence it is therefore proposed to permit reimbursement in a graded manner. In the pre lingual deafness, total reimbursement of the ceiling rate or actuals, whichever is less, for cochlear implant will be allowed in respect of implants carried out on children aged between 1 and 5 years. For children between the age of 5 and 10 yrs, 80% of the ceiling rate for implant will be reimbursed. For children above the age of 10 years, but below 16 years of age, only 50% of the ceiling rate for the implant will be reimbursed.

20. 50% of the cost of the wearable components, e.g. Speech Processor, Microphone, etc. (excluding cords, batteries) for the purpose of up-gradation and / or replacement due to wear and tear may be allowed, after a period of three years, to be considered on the basis of advice of Sr Adv (ENT).

21. Only unilateral implantation will be allowed. As cochlear implant surgery is a planned surgery, prior permission has to be obtained before the surgery is undertaken i.e prior approval procedure will be followed.

22. Selection criteria for Cochlear Implant

(a) Pre-lingually deaf children (severe to profound B/L S.N.H. Loss)

(i) Age group between 1 to 16 yrs. However, children using hearing aids and getting auditory training from age 1 yr of less may be considered at higher age also on a case to case basis.

(ii) No appreciable benefit from hearing aids after 6 months of trial with hearing aids. No speech formation seen.

(iii) No mental retardation.

(iv) No active middle ear cleft disease. Perforation of the TM should be closed at least three months prior to implantation.

- (v) No cochlear aplasia and/ or agenesis of cochlear nerve.
 - (vi) No retro cochlear lesion or central deafness, and
 - (vii) Good family support for post op rehabilitation
- (b) Post-lingually deaf candidates (B/L profound S N H Loss).
- (i) There should be no appreciable benefit from hearing aids (both ears).
 - (ii) No active middle ear cleft disease.
 - (iii) Perforation of the TM should be repaired three months prior to the implantation.
 - (iv) Deafness should be due to cochlear lesions, and
 - (v) Post meningitic labyrinthitis ossificans of the cochlea is a contraindication. However cases like post inflammatory ossification of cochlea, cochlear dystrophies and cochlear otosclerosis with visible perilymphatic shadow in MRI are relative indications and can be done on case to case basis.

23. **Type of Implants.** Only multi channel cochlear implant duly approved by appropriate authority should be recommended.

24. **Basic pre-op Investigations for Cochlear Implant :**

- (a) **Audiological.**
 - (i) OAE.
 - (ii) BERA/ASSR.
 - (iii) Impedence (in children).
 - (iv) Audiogram/Aided audiogram.
- (b) **Radiological.**
 - (i) HRCT temporal bone for bony cochlea and middle ear cleft.
 - (ii) 3D MRI for membranous cochlea, Neural Bundle and brain
- (c) IQ/Psychiatric evaluation in children with prelingual deafness.

LIST OF SUPERSPECIALITY HOSPITALS

Ser	Name of Hospitals	Recognized for	
		General Services	Specialised Services
1.	Kailash Hospital and Research Centre, H-33, Sector-27, Noida-201301	General Medicine, ENT, Dental (Prosthetic, Periodontal & Orthodontics only), Orthopedics, Microbiology, General Surgery, Ophthalmology, Psychiatry, Blood Bank, Obstetrics and Gynecology, Pediatrics, Dermatology, Pathology and Radio Diagnosis.	<u>Surgery</u> : Neuro Surgery, Plastic and Reconstructive, Cardiothoracic Surgery, Vascular Surgery, Geneto Urinary Surgery, Pediatric Surgery, Oncology Surgery, Gastro Intestinal Surgery, Traumatology, Joint Replacement, Spinal, Prosthetic and Laparoscopic Surgery. <u>Medicine</u> : Neuro Medicine, Cardiology, Respiratory Disease, Gastroenterology, Endocrinology, Nephrology, Clinical Haematology, Oncology (Medical), Critical Care Medicine and Interventional Cardiology. <u>Radio-diagnosis/Imaging</u> : MRI <u>Paediatrics</u> : Nenatology
2.	Sir Gangaram Hospital, Sir Gangaram Hospital Marg, Delhi	-	<u>Surgery</u> : Heart, Cancer, Renal, Total Hip/Knee Joint Replacement and Prostate Surgery
3.	Indraprastha Apollo Hospital, Sarita Vihar, Delhi Mathura Road, New Delhi – 110044	Radio-Diagnosis	<u>Surgery</u> : Cardiothoracic Surgery, Genito Urinary Surgery (Urology and Lithotripsy), Joint Replacement, Prosthetic and Laparoscopic Surgery. <u>Medicine</u> : Cardiology, Nephrology (Including Dialysis), Interventional Cardiology, Radiotherapy and Nuclear Medicine. <u>Radio-diagnosis/Imaging</u> : CT Scan and MRI <u>Others</u> : Kidney Transplant.
4.	Wockhard Hospital Ltd, Mulund Goregon Link Road, Mumbai – 400078	General Medicine, ENT, Orthopedics, Microbiology, General Surgery, Ophthalmology, Anesthesia, Blood Bank, Paediatrics, Pathology, Radio-diagnosis and Emergency	<u>Surgery</u> : Neuro Surgery, Cardiothoracic, Vascular Surgery, Geneto Urinary Surgery, Paediatric Surgery, Gastro Intestinal, Traumatology, Joint Replacement, Spinal and Laproscopic Surgery. <u>Medicine</u> : Neuro Medicine, Cardiology, Respiratory Diseases, Gasto Enterology, Endocranology, Rheumatology, Critical Care medicine and Interventional Cardiology. <u>Radio-diagnosis/Imaging</u> : CT Scan and MRI.
5.	Manipal Hospital, 98, Rustan Bag Airport Road, Bangalore	-	Heart and Cancer
6.	Narayana Hridayalaya, Bangalore	-	<u>Surgery</u> : Cardiology and Cardiac Surgery.

Ser	Name of Hospitals	Recognized for	
		General Services	Specialised Services
7.	Apollo Hospital, Deccan Hospital Ltd, Jubilee Hills, Phase 3, Hyderabad	-	Surgery : Heart, Cancer, Renal, Total Hip, Knee, Joint Replacement, Prosthetic Surgery (TCRP) and Lithotripsy
8.	Medvin Hospital, Raghava Ratana Towers, Chirag, Ali Lane, Hyderabad	-	Heart, Cancer and Renal
9.	Apollo Hospital, 21 Greams Land (Off Greams Road), Chennai	-	Surgery : Heart, Cancer, Renal and Total Hip, Knee, Joint Replacement and Prosthetic Surgery (TCRP)
10.	Sri Ramachandra Medical Centre 1. Ramachandra Nagar Porur, Chennai – 600116	General Medicine, ENT, Dental, Orthopaedics, Microbiology, General Surgery, Ophthalmology, Psychiatry, Blood Bank, Obstetrics and Gynaecology, Paediatrics, Dermatology, Pathology and Radio Diagnosis	Surgery : Neuro Surgery, Plastic and Reconstructive, cardiopthoracic Surgery, Vascular Surgery, Genito urinary Surgery, Paediatric Surgery, Gastro intestinal Surgery, Traumatology, Joint Replacement, Spinal Surgery and Laparoscopic Surgery Medicine : Neuro medicine, Cardiology, Respiratory Disease, Gastroenterology, Endocrinology, Nephrology, Rheumatology, Oncology (Medical), Critical Care Medicine and Interventional Cardiology. Radio-diagnosis/Imaging : CT Scan and MRI. Paediatrics : Neonatology Cardiology, Haematology and Nephrology
11.			