

OPTIMAL SPECIALIST HOSPITAL LIMITED

PREMIUM BILLING GUIDE EFFECTIVE 21ST JUNE 2024

OUTPATIENT SERVICES	FEES	
Registration	5,000.00	
Annual Renewal	2,000.00	
General Consultation/ Month	10,000.00	(Minimum)
General Consultation Review/Follow up	7,500.00	
Express Specialist Consultation (IN House Consultants)	40,000.00	(Minimum)
Specialist COnsultation/Month (Gynae)	40,000.00	(Minimum)
Specialist COnsultation/Month (Paediatrics)	35,000.00	
Specialist Consultation/Month (Orthopaedic)	40,000.00	(Minimum)
Specialist COnsultation/Month (Burns Specialist)	50,000.00	per Visit(Minimum)
Specialist Consultation/Month (Neurosurgeon, Cardio, ENT, Gen. Surgery)	40,000.00	(Minimum)
Subsequent Months(Same Case)	25,000.00	(Minimum)
Emergency General Consultation (From 10 PM)	20,000.00	(Minimum)
Family Registration	30,000.00	
Small Company Registration/ Schools Registration	200,000.00	
Annual Renewal	20,000.00	
Immunisation (Routine NPI)	2,000.00	
Casualty Card Fee	2000.00/Ailment/Attendance	
Home Visit by Doctor	40,000.00	per Visit(Minimum)
Home Visit by Nurse	20,000.00	per Visit(Minimum)
Use of Ambulance	15000.00 PER HOUR(Minimum Fee 30,000.00	
Fertility Clinic Registration	150,000.00/ YR OR 30,000.00/ Month (Minimum)	
physiotherapy Fee	5000	(Minimum)
physiotherapy Treatment/ Session	10,000.00	(Minimum)
ONLINE CONSULTATION _ NIGERIA(15 MINUTES)		
Registration (Phone, Email/Whatsapp or Zoom)	AS ABOVE	
General Consultation Fee/Month		
Phone	5,000	
Email/Whatsapp	5,000	
Zoom	10,000	
SPECIALIST CONSULTATION/MONTH (Cardio/Gynae/ Surgery)		
Phone	20,000	
Email/Watsapp	20,000	
Zoom	30,000	
SPECIALIST CONSULTATION/MONTH (Paediatrics)		
Phone	15,000	
Email/Watsapp	15,000	
Zoom	20,000	
ONLINE CONSULTATION _ OUTSIDE NIGERIA(10 MINUTES)		
Registration (Phone, Email/Watsapp or Zoom)	AS ABOVE	
GENERAL CONSULTATION FEE/MONTH		
Phone	10,000	
Email/Watsapp	10,000	
Zoom	30,000	
SPECIALIST CONSULTATION/MONTH (Cardio/Gynae/Surgery)		

Phone	30,000.00	
Email/Whatsapp	30,000.00	
Zoom	50,000.00	
SPECIALIST CONSULTATION/MONTH (Paediatrics)		
Phone	20,000.00	
Email/Whatsapp	20,000.00	
Zoom	40,000.00	
ANTE-NATAL CARE (ANC)		
REGISTRATION	5,000.00	
ANC FEES		
(Including routine consultations,		
Routine Drugs F/A, Iron, Vit C.,	100,000.00	
plus 2 Scans, 2 T.T.)		
ROUTINE ANC BLOOD & URINE TESTS		
Urinalysis, Urine m/c/s, Blood Group, Genotype, VDRL, HEP. B, HIV, RBS -----	15,000.00	
Card + ANC Fees + Routine Lab tests	120,000.00	
EXECUTIVE EXPRESS ANTENATAL / DELIVERY FEES INCLUDES		
ANC, Comprehensive ANC Tests, Simple OUT Patient Treatments, AND	500,000.00	
Normal Deliveries. (Admissions, Operative Vaginal Delivery AND C/S) are Exclusions.		
MEDICAL EXAMINIATION		
Pre-Employment	12,000.00	
Insurance 2.5% of Amount Insured Or	12,000.00	(Minimum)
Medical Certificates	10,000.00/ ONE	
I & D (Minor)	20,000.00	(Minimum)
(Medium)	40,000.00	(Minimum)
(Large)	100,000.00	(Minimum)
Daily Dressing/ By Nurse	2000/DAY	(Minimum)
By Doctor	4000/DAY	(Minimum)
Suturing	2000/STITCH	(Minimum)10,000.00
Medical Reports	15,000/ONE	
Hospital fee for outpatient treatment	12,500/ Outpatient Prescription	
PROCEDURES		
Lumbar Puncture	20,000.00	(Minimum)
N-G TUBE (For stomach decompression or feeding) / Enema Saponis	20,000.00	
Setting of IV Line with Medicut	5,000.00	
Re-setting of IV Line with Medicut	5,000.00	
Setting of IV Line with Scalp Vein	3,000.00	
Re-Setting of IV Line with Scalp Vein	3,000.00	
CIRCUMCISION (Classical / Gomko)		
Plastibel	25,000(1,000 Discount for Optimal Baby)	
	30,000(2,000 Discount for Optimal Baby)	
Ear Piercing	10,000.00	(Minimum)
Removal of Foreign Body in the Ear & Nose(With Anaesthesia)	60,000.00	(Minimum)
Removal of Foreign Body in the Ear & Nose(Without Anaesthesia)	30,000.00	(Minimum)

Intramuscular/Subcute Injections(To be added to OPD prescription)	5,000.00	(Minimum)
Intravenous Injections (To be added to OPD prescriptions)/ INJ	7,500.00	(Minimum)
Infra Red Heat Therapy / Session	10,000.00	(Minimum)
<u>ADMISSION/IN PATIENT DEPOSIT (PRIVATE PATIENTS ONLY)</u>		
Non-Surgical Admission (Short Stay 1-2 days)	300,000.00	(Minimum)
(Medium Stay 3-5 DAYS)	600,000.00	(Minimum)
(Long Stay - One Week and above)	1,500,000.00	(Minimum)
(Patient admitted as short or medium stay and is now staying long is to pay additional deposit of 500,000 per week of continuous stay)		
Observation in Casualty(i.e less than 12hrs)	100,000.00	(Minimum)
Casualty Room admission i.e Over 12 Hours	200,000.00	(Minimum)
Minor Operations	200,000.00	(Minimum)
Medium Operations	500,000.00	(Minimum)
Major Operations	1,000,000.00	(Minimum)
HOSPITAL FEES FOR ADMITTED PATIENT	125,000.00	PER DAY
<u>ROOMS</u>		
Room 102	50,000.00	
Rooms 103,105, 107	40,000.00	
Rooms 205, 207,	45,000.00	
Room 104	60,000.00	
Room 202	70,000.00	
Room 100 (General Room)	25,000.00	
Casualty Room	20,000.00	
Room discount - 25% after 3 weeks of continous stay		
Room discount - 50% after 4 weeks of continous stay		
<u>FEEDING</u>	2,500 Meal or 7,000	
<p>NB: Only Rooms 100,103, 105,107,205 and 207 are for HMO patients. On no account should any HMO Patient be admitted into any other room reserved for private patients except in dire emergency and with the permission of the Managing Consultant. Any HMO patient who desires to stay in any room reserved for private patients should pay the room difference .</p>		
<u>OBSTETRICS SERVICES</u>		
Deposit for Vaginal Delivery	150,000.00	(Minimum)
Obsterician's Fees for C/S (1ST C/S)	250,000.00	(Minimum)
Obsterician's Fees for C/S (2nd C/S)	300,000.00	(Minimum)
Obsterician's Fees for C/S (3RD & 4TH C/S)	350,000.00	(Minimum)
Obsterician's Fees for C/S (5TH C/S & ABOVE)	400,000.00	(Minimum)
Obsterician's Fees for Normal Delivery	50,000.00	(Minimum)

Normal Delivery Fees without Episiotomy (All Inclusive) + 12 Hours Observation	150,000.00	(Minimum)
Normal Delivery Fees without Episiotomy (All Inclusive) + 24 Hours Observation	200,000.00	(Minimum)
Normal Delivery Fees without Episiotomy (All Inclusive) + 48 Hours Observation	240,000.00	(Minimum)
Normal Delivery Fees without Episiotomy (All Inclusive) > 48 Hours Observation .	40,000 PER	Extra Day
For any Extra Baby Delivered Vaginally	100,000.00	
Operative Vaginal delivery (i.e vacuum /forceps) + upto 48 hours observation	400,000.00	(Minimum)
Operative Vaginal delivery (i.e vacuum /forceps) + extra day stay after 48 hours	40,000.00	Extra Day
CS (Minimum Deposit) (1ST C/S)	300,000.00	(Minimum)
CS (Minimum Deposit) (2ND C/S)	300,000.00	(Minimum)
CS (Minimum Deposit) (3rd & 4th C/S)	300,000.00	(Minimum)
CS (Minimum)Deposit) (5TH & ABOVE C/S)	300,000.00	(Minimum)
First C/S (All Inclusive Fees) (No Complications)	500,000.00	(Minimum)
For any Extra Baby Delivered by C/S	150,000.00	
Intrapartum B.T.L	150,000.00	(Minimum)
Cervical Ripening	40,000.00	(Minimum)
Induction of labour	50,000.00	(Minimum)
Augmentation of labour	50,000.00	(Minimum)
Episiotomy and repairs	60,000.00	(Minimum)
Cervical Laceration Repair	100,000.00	(Minimum)
Manual removal of placenta under Anaesthesia	150,000.00	(Minimum)
Evacuation, Dilatation & Curettage	120,000.00	(Minimum)
Cerclage	250,000.00	(Minimum)
Use of labour room	60,000.00	(Minimum)
Removal of Cerclage Suture	50,000.00	(Minimum)
N.B. Normal Delivery HMO Patient is to be Discharged within 12 Hours and Uncomplicated C/S HMO Patient is to be Discharged within 72 Hours		
NEONATAL SERVICES		
Deposit for Incubator Care	350,000.00	(Minimum)
Paediatrician's fee	15000/Day	(Minimum)
Incubator care + Nursery Room Fee	15000/Night	(Minimum)
Incubator Care + Nursery fee + Phototherapy	20000/Night	(Minimum)
Phototherapy	5000/Night	(Minimum)
Phototherapy + Nursery Room Fee	12,500/Night	(Minimum)
Oxygen / Day via Oxygen Extractor	See price in the pharmacy column	
Exchange Blood Transfusion	50,000.00	Per Session excluding cost
Nursery Room Fee	7,500.00	Per Day Minimum
Neonatal Care	7,500.00	Per Day Minimum
Use of Soluset	7,500.00	(Minimum)
Nebulizer / Session	7,500.00	(Minimum)
SURGICAL SERVICES		
Use of theatre-minor cases	60,000.00	(Minimum)
Use of theatre-medium cases	100,000.00	(Minimum)

Major cases	190,000.00	(Minimum)
Surgeon's fee Major	400,000.00	(Minimum)
Medium	250,000.00	(Minimum)
Minor	150,000.00	(Minimum)
Anaesthetist fee Major	60,000.00	(Minimum)
Medium	50,000.00	(Minimum)
Minor	30,000.00	(Minimum)
Anaesthetist materials Major	50,000.00	(Minimum)
Medium	35,000.00	(Minimum)
Minor	25,000.00	(Minimum)
Outpatient procedures will now attract room fee rate	15% of total bill	
<u>SURGICAL SERVICES (All Inclusive Price Procedures Only)</u>		
Herniorrhaphy	350,000.00	Per Site (Minimum)
Appendicitis	380,000.00	(MINIMUM)
Orchidopexy	250,000.00	Per Site (MINIMUM)
Excisional Biopsy (Scrotum, , Penis, Limbs, etc)	250,000.00	Per Site (MINIMUM)
Prostatectomy	750,000.00	(Minimum)
Exploratory Laparotomy	750,000.00	(Minimum)
<u>GYNAE SERVICES (All Inclusive Price for Procedures Only)</u>		
D & C	120,000.00	(Minimum)
Pap's Smear (Procedure and Cytology)	30,000.00	(Minimum)
Formal Cervical Dilatation + I.U.Adhesiolysis + Foley's Catheter Insertion	160,000.00	(Minimum)
Hydrotubation	160,000.00	(Minimum)
Sonohysterosalpingogram	250,000.00	(Minimum)
Excisional biopsy – uterus, cervix, vagina, vulva, breast, scrotum, penis etc (without histology)	250,000.00	(Minimum)
Marsupialization	250,000.00	(Minimum)
Postpartum B. T. L.	250,000.00	(Minimum)
Minilaparotomy, B. T. L, cone biopsy	350,000.00	(Minimum)
Laparotomy / Myomectomy / Hysterectomy	750,000.00	and Above
Vaginal Hysterectomy	750,000.00	(Minimum)
Perineorrhaphy	300,000.00	(Minimum)
<u>Colpo-Perineorrhaphy</u>		
Anterior	400,000.00	(Minimum)
Posterior	400,000.00	(Minimum)
Both	750,000.00	(Minimum)
Baby Sex Selection Clinic's Registration fee	150,000.00	(Minimum)
D&C + Culdocentesis or Colpotomy	350,000.00	(Minimum)
I.U.I	650,000.00	(Minimum)
<u>Family Planning</u>		
Condoms	2000/four	
I. U.C.D. insertion (preservice Lab test applicable)	50,000.00	(Minimum)
I.U.C.D. Removal	20,000.00	(Minimum)
Implanon insertion (preservice Lab test applicable)	100,000.00	(Minimum)
Implanon Removal	50,000.00	(Minimum)
Vaginal Foaming tabs		
<u>N.B THIS BILLING GUIDE IS SUBJECT TO PERIODIC CHANGES / REVIEWS</u>		

OPTIMAL SPECIALIST HOSPITALS LIMITED**COMPREHENSIVE PATHOLOGICAL SERVICES****PRICE LIST EFFECTIVE JANUARY 31ST, 2024****HAEMATOLOGY**

ANTIBODY TITRATION TEST	3,000.00
BLEEDING TIME	3,000.00
BLOOD GROUPING (ABO/RH)	3,000.00
CLOTTING TIME	3,000.00
COOMB'S TEST (DIR/INDIR)	4,000.00
CLOTTING PROFILE	10,000.00
DIFFERENTIAL COUNT	2,000.00
ERYTHROCYTE SED. RATE	2,500.00
FULL BLOOD COUNT (FBC)+ ESR	6,000.00
FULL BLOOD COUNT FBC	4,500.00
HAEMOGLOBIN (HB)	2,000.00
HB GENOTYPE	4,000.00
KAOLIN-CEPHALIN (CLOTTING TIME)	4,000.00
L.E. CELLS	4,000.00
MEAN CORP. HB CONC.	2,000.00
MEAN CELL VOLUME MCV	2,000.00
MEAN CELL HAEMOGLOBIN	2,000.00
OSMOTIC FRAGILITY TEST	2,500.00
PACKED CELL VOLUME PCV	2,000.00
PLATELET COUNT	2,000.00
PROTHROMBIN TIME	2,500.00
WHITE CELL COUNT WCC	2,000.00
RED CELL COUNT	2,000.00
RETICULOCYTE COUNT	3,000.00
SICKEL CELL SCREENING	3,000.00
TOTAL EOSINOPHIL COUNT	2,000.00

MICROBIOLOGY/PARASITOLOGY

ASO TITRE	3,500.00
AUSATRALIAN (HEP B) ANT	3,500.00
BLOOD MALARIA PARASITE	4,000.00
BLOOD CULTURE/SENSITIVITY	15,000.00
BLOOD PREGNANCY TEST	3,000.00
CSF MICRO & CELL COUNT	10,000.00
CSF M/C/S	10,000.00
CD4 COUNT	21,000.00
CREATININE CLEARANCE	15,000.00

COMPLETE HEALTH PROFILE (WELLNESS CLINIC)

BRONZE	100,000.00
SILVER	150,000.00
GOLD	200,000.00
DIAMOND	250,000.00
DISPOSABLE STERILE VAGINAL SPECULUM	1,000.00
FOOD HANDLER'S TESTS	25,000.00
HVS/URETHRAL SWAB M/C/S	7,500.00
HEAF/MANTOUX TEST	5,000.00
HEPATITIS C ANT	4,000.00
HIV SCREENING	3,500.00

HIV CONFIRMATION	32,000.00	
MICROFILARIA/TRYPANOSOMES	4,000.00	
RHEUMATOID FATOR	5,000.00	
ROUTINE ANTENATAL BLOOD / TESTS	20,000.00	
SKIN SCRAPPING FOR FUNGAL ELEMENTS	10,000.00	
STOOL MICROSCOPY ONLY	3,000.00	
STOOL M/C/S	12,500.00	
STOOL OCC. BLOOD	5,000.00	
SEMEN ANALYSIS ONLY	7,500.00	
SEMEN M/C/S	7,500.00	
SPUTUM ZN FOR AFB M/C/S	7,500.00	
SPUTUM M/C/S	10,000.00	
SERUM AFB	7,500.00	
URINE MICROSCOPY ONLY	3,000.00	
URINE M/C/S	7,500.00	
URINE PREGNANCY TEST	2,000.00	
VDRL	3,000.00	
WIDAL REACTION	3,000.00	
WOUND SWAB M/C/S	7,500.00	
HISTOPATHOLOGY		
CYTOLOGY (ONLY)	25,000.00	
HISTOLOGY	30,000.00	
POSTMORTEM (FOETUS)	80,000.00	
ENDOCRINOLGY		
AMBIGUOUS GENITALIA	30,000.00	
FOLLICLE STIMULATING HORMONE	10,000.00	
GALACTORRHOEA PROFILE	35,000.00	
GROWTH HORMONE	15,000.00	
GYNAECOMASTIA PROFILE	30,000.00	
INFERTILITY PROFILE	35,000.00	
IMPOTENCY/FRIGIDITY PROFILE	35,000.00	
INSULIN	15,000.00	
LEUT. HORMONE (LH)	10,000.00	
MOLAR PREGNANCY TEST	10,000.00	
MENSTRUAL DISORDER PRO	35,000.00	
MENSTRUAL DISORDER VIRILISM	35,000.00	
OBESITY PROFILE	35,000.00	
OVULATION PROFILE	35,000.00	
OESTRADIOL (E2)	10,000.00	
OESTRADIOL (E3)	10,000.00	
PITUITARY PROFILE (A)	35,000.00	
PITUITARY PROFILE (B)	35,000.00	
PROGESTERONE	10,000.00	
PROLACTIN	10,000.00	
CKMB	20,000.00	
CARDIAC TROPONIN I & T	15,000/EACH	
C-REACTIVE PROTEIN	7,000.00	
MICROALBUMIN	15,000.00	
D-DIMER	12,500.00	
FSH	15,000.00	
ESTROGEN	15,000.00	

SHORT STATURE	35,000.00	
THYROID SCREENING (T3, T4)	15,000.00	
THYROID SCREENING (T3, T4, TSH)	20,000.00	
TSH	10,000.00	
TRIIODOTHYRONINE	10,000.00	
THYROXINE	10,000.00	
TESTOSTERONE	10,000.00	
COMPLETE THYROID SCREENING INCLUDING FREE T3, FREE T4	35,000.00	
CLINICAL CHEMISTRY		
ACID PHOSPHATASE	3,500.00	
ALBUMIN	3,500.00	
ALKALINE PHOSPHATE	3,500.00	
ANTI-NUCLEAR ANTIBODIES	20,000.00	
ALLERGY TEST (IGE)	20,000.00	
ALPHA FETO PROTEIN	12,500.00	
AMYLASE	3,500.00	
BICARBONATE	3,500.00	
BREAST CANCER ANTIGEN (BCA)	60,000.00	
BETA-HCG (B.HCG) ASSAY	40,000.00	
CALCIUM	3,500.00	
CHOLESTEROL	3,500.00	
CHLORIDE	3,500.00	
COMPLETE URINALYSIS (URINE M/C/S + URINALYSIS)	7,500.00	
CSF CHLORIDE	3,500.00	
CSF PROTEIN (TOTAL)	3,500.00	
CSF SUGAR	3,500.00	
CREATININE	4,500.00	
CORTISOL	25,000.00	
CMV (ELISA SCREENING)	25,000.00	
CHLAMYDIA (ELISA SCREENING)	20,000.00	
DHEA-S	2,500.00	
DIRECT BILIRUBIN	3,500.00	
DRUG OF ABUSE TEST	12,000.00	
FASTING BLOOD SUGAR	3,500.00	
FULL ELECTROLYTES	14,000.00	
FULL LIPID STUDIES	10,000.00	
GLUCOSE TOLERANCE	15,000.00	
GLUCOSYLATED HAEMOGLOBIN	7,500.00	
GLUCOSE 6 PHOSPHATE DEHYDROGENASE (G6PD)	10,000.00	
GLOBULIN	3,500.00	
HDL	3,500.00	
H. PYLORI. ANTIGEN TEST	7,500.00	
H. PYLORI. STOOL TEST	8,500.00	
HEPATITIS B VIRAL LOAD	75,000.00	
HIV 1 VIRAL LOAD	60,000.00	
HEPATITIS C VIRAL LOAD	80,000.00	
TORCH SCREENING PANEL	56,000.00	
HERPES I & II (ELISA SCREENING)	25,000.00	
STI PROFILE	37,500.00	
STI PROFILE WITH HERPES	50,000.00	

LIVER FUNCTION TESTS I	12,500.00	
LIVER FUNCTION TESTS II - (LFT 1 + ALB + TOTAL PROTEIN)	15,000.00	
LIVER FUNCTION TESTS II - (LFT 1 + ALB + TOTAL PROTEIN)+ ALPHA FETO PROTEIN	30,000.00	
LDL	3,500.00	
MOLAR PREG TEST	10,000.00	
POTASSIUM	3,500.00	
PHOSPHORUS	6,000.00	
PROSTATE SPECIFIC ANTIGEN (PSA) (SEMI QUANTITATIVE)		
PROSTATE SPECIFIC ANTIGEN (PSA) (ELISA QUANTITATIVE)	10,000.00	
RANDOM BLOOD SUGAR	3,500.00	
SEMINAL FRUCTOSE TEST	15,000.00	
SODIUM	3,500.00	
S. G .O. T	4,500.00	
S. G. P. T	4,500.00	
SPERM ANTIBODIES	25,000.00	
TOTAL BILIRUBIN	3,500.00	
TOTAL PROTEIN	3,500.00	
TRIGLYCERIDES	3,500.00	
UREA	4,000.00	
URIC ACID	5,000.00	
URINALYSIS ONLY	1,500.00	
VMA	15,000.00	
2HR P- P BLOOD SUGAR	6,000.00	
<u>BLOOD TRANSFUSION</u>		
CROSS-MATCHING	5,000.00	
1 PINT OF BLOOD (RH POSITIVE)	35,000.00	
(BLOOD TO BE RE-SCREENED IN OPTIMAL LAB)		
1 PINT OF BLOOD (RH NEGATIVE)	40,000.00	
(BLOOD TO BE RE-SCREENED IN OPTIMAL LAB)		
IF PATIENT BRINGS A DONOR	20,000.00	
IF DONOR IS NOT FIT, PATIENT PAYS FOR THE COST OF SCREENING	15,000.00	
COST OF TRANSFUSING 1 PINT	15,000.00	
<u>N.B.</u>		
FOR COMPANY PATIENT ADD 15% TO EACH COST		
HMO PATIENTS TO PAY THE DIFFERENCE IN PRICE BETWEEN THE HMO RATE AND OPTIMAL RATE.		
<u>X-RAY SERVICES</u>		
ABDOMEN FOR PREGNANCY	4,500.00	
CERVICAL SPINE (ALL VIEWS) including open mouth view	9,000.00	
CHEST (PA ONLY)	6,000.00	
FOOT	4,500.00	
LUMBOSACRAL SPINE	6,000.00	
PELVIS	6,000.00	
SKULL ALL VIEWS	9,000.00	
SKULL AP & LATERAL	6,000.00	
ABDOMEN (STRAIGHT)	5,000.00	
ABDOMEN (SUPINE & ERECT)	9,000.00	
ANKLE JOINT	4,500.00	
CERVICAL SPINE (AP & LATERAL)	6,000.00	

CHEST (PA & LATERAL)	8,000.00	
DORSAL SPINE	9,000.00	
ELBOW JOINT	4,000.00	
FOREARM (RADIUS & ULNA)	4,000.00	
HAND	4,000.00	
KNEE JOINT	5,000.00	
KNEE JOINT AND SKYLINE VIEW	6,000.00	
LATERAL PELVIMETRY	6,000.00	
LEG-TIB & FIB	5,000.00	
LUMBOSACRAL SPINE (WITH OBLIQUE)	9,000.00	
MANDIBLE	6,000.00	
MASTOIDS	6,000.00	
OPTIC FORAMINA	5,000.00	
PELVIS AND HIPS	6,000.00	
PELVIS FOR IUCD	8,000.00	
PITUITARY FOSSA	5,000.00	
POST NASAL SPACE	5,000.00	
SHOULDER JOINT	6,000.00	
SHOULDER JOINT AND AXILLARY VIEW	9,000.00	
SINUSES	9,000.00	
SKELETAL SURVEY-ADULT	40,000.00	
TEMPORO MANDIBULAR JOIN	9,000.00	
THIGH-FEMUR	5,000.00	
THORACIC INLET	5,000.00	
THORACO LUMBAR SPINE	6,000.00	
UPPER ARM	4,000.00	
WRIST JOINT	4,000.00	
SPECIAL INVESTIGATIONS		
ARTHROGRAM - ONE LEG	110,000.00	
B/MEAN & FOLLOW THRO	55,000.00	
BARIUM ENEMA	55,000.00	
BARIUM MEAL	55,000.00	
BARIUM SWALLOW	55,000.00	
BARIUM SWALLOW/MEAL	55,000.00	
CYSTO – URETHROGRAM	50,000.00	
FEMORAL ANGIGRAM -ONE LEG	60,000.00	
FISTOLOGRAM	45,000.00	
HYSTERO = SALPINGOGRAM	24,000.00	
I.V.U. FOR BPU	55,000.00	
INTRAVENOUS PYELO-IVU	55,000.00	
MAMMOGRAM (R&L)	20,000.00	
MCUG/RCUG – COMBINED	40,000.00	
MYELOGRAM – CERVICAL	60,500.00	
MYELOGRAM – LUMBAR	55,000.00	
ORAL CHOLECYSTOGRAM	35,000.00	
OVULOMETRY/TV. SCAN	7,500.00	
SIALOGRAM	40,000.00	
SINOGRAM	40,000.00	
VENOGRAM-ONE LEG	80,000.00	
OTHER VITAL STUDIES		
ECG WITH REPORT (RESTING)	7,500.00	

(PRE & POST EXCERCISE)	12,500.00	
24 HOURS HOLTER ECG	50,000.00	
ECHO CARDIOGRAPHY (By the Cardiologist)	45,000.00	
SPIROMETRY (Lung Function Tests)	15,000.00	
12 HOURS SLEEP OXIMETRY	50,000.00	
ULTRA SOUND SCAN		
ABDOMINO-PELVIC SCAN	15,000.00	
BREAST SCAN	10,000.00	
LOWER ABDOMEN SCAN	7,500.00	
OBSTETRIC SCAN	7,500.00	
PELVIC USS SCAN WITH FILM 2D	7,500.00	
PELVIC USS SCAN WITH FILM 4D	10,000.00	
PROSTRATE SCAN	10,000.00	
TESTES SCAN	10,000.00	
THYROID SCAN	10,000.00	
UPPER ABDOMEN	9,500.00	
TRANSVAGINAL SCAN (TVS)	12,500.00	
EXTRA FILM 4D (BABY PACE)	1,000.00	
DOPPLER SCAN STUDIES		
ONE UPPER LIMB (ARTERIAL)	40,000.00	
ONE UPPER LIMB (VENOUS)	30,000.00	
TWO UPPER LIMBS (ARTERIAL)	80,000.00	
TWO UPPER LIMBS (VENOUS)	60,000.00	
ONE LOWER LIMB (ARTERIAL)	40,000.00	
ONE LOWER LIMB (VENOUS)	30,000.00	
TWO LOWER LIMBS (ARTERIAL)	80,000.00	
TWO LOWER LIMBS (VENOUS)	60,000.00	

**WITH
DOPPLER
STUDIES ADD
20,000**

PHARMACY PRICE LIST OF DRUGS EFFECTIVE MAY 15TH, 2024

ANTI- MALARIAL		AMOUNT
AMODIAQUINE TABS	6 TABS	1,700.00
ARTEETHER INJ 150MG (EMAL)	PER AMP	2,400.00
ARTEETHER INJ 75MG (EMAL)	PER AMP	1,800.00
ARTEMETHER INJ 80MG	PER AMP	300.00
ARTEMETHER/LUMEFANTRINE (LOKMAL SUSP)	PER BOTTLE	2,400.00
ARTEMETHER/LUMEFANTRINE(LONART SUSP)	PER BOTTLE	3,300.00
ARTEQUICK TAB	4 TABS	2,600.00
ARTEQUIN PAEDIATRIC 300/375MG	3 TABS	11,250.00
ARTEQUIN ADULT 600/750MG	6 TABS	15,000.00
ARTESUNATE INJ 30MG	PER VIAL	3,000.00
ARTESUNATE INJ 60MG	PER VIAL	3,500.00
ARTESUNATE INJ 120MG	PER VIAL	5,000.00
ARTESUNATE TAB 100MG(HMO)	6 TABS	1,700.00
ARTHEMED TAB 80/480MG	6 TABS	1,600.00
ATOVAQUONE 250MG/PROGUANIL 100MG	PER TAB	5,250.00
CAMOSUNATE BELOW 1YR	PER PACK	2,000.00
CAMOSUNATE 1-6	PER PACK	1,700.00
CAMOSUNATE TAB 7-13	6 TABS	2,100.00
CAMOSUNATE TAB (ADULT)	12 TABS	2,600.00
COARINATE ADULT	PER TAB	2,300.00
COARINATE CHILD	PER TAB	2,100.00

COARTEM 80/480MG	6 TABS	5,300.00
COARTEM 20/120MG (DISPERSIBLE)	PER TAB	600.00
CHLOROQUINE INJECTION	PER VIAL	800.00
CHLOROQUINE SYR	PER BOTTLE	1,600.00
CHLOROQUINE TABS (4-4-2)	10 TABS	1,800.00
D-ARTEPP 20/160MG (DISPERSIBLE)	6 TABS	3,000.00
D-ARTEPP 40/320MG (DISPERSIBLE)	6 TABS	3,600.00
D-ARTEPP 60/480MG	6 TABS	3,800.00
D-ARTEPP 80/640MG	6 TABS	3,800.00
FANSIDAR TAB 500/25MG	3 TABS	1,200.00
FANSIDAR SYR	PER BOTTLE	1,000.00
LOKMAL 20/120MG (DISPERSIBLE)	6 TABS	1,000.00
LUMARTEM TAB 20/120MG	PER TAB	80.00
NIVAQUINE FORTE CAPS	5 (2-2-1)	2,300.00
P-ALAXIN TAB 40/320MG	9 TABS	2,700.00
P-ALAXIN SUSP	PER BOTTLE	3,800.00
PALUDRINE TAB 100MG	PER TAB	800.00
QUININE TAB 300MG	PER TAB	140.00
QUININE INJ 600MG	PER AMP	220.00
QUININE SYR	PER BOTTLE	3,300.00
RELUDRINE TAB 100MG	PER TAB	140.00
SYRIAM TAB	3 TABS	3,300.00
ANTI TUBERCULOSIS DRUGS		
DAPSONE TAB 100MG	PER TAB	300.00
ETHAMBUTOL TAB 400MG	PER TAB	300.00
ISONIAZID 300MG	PER TAB	200.00
PYRAZINAMIDE TAB 500MG	PER TAB	400.00
PYRIDOXINE TAB 50MG	PER TAB	200.00
RIFAMPICIN CAP 300MG	PER CAP	600.00
	PER VIAL	1,000.00
ANTIBIOTIC SYR / SUSPENSION		
AMOKSIKLAV SUSP 156.25MG	PER BOTTLE	4,800.00
AMOXYL SUSP	PER BOTTLE	2,800.00
AMPICLOX DROP	PER BOTTLE	1,700.00
AMPICLOX SUSP	PER BOTTLE	2,900.00
AUGMENTIN SUSP 228.5MG	PER BOTTLE	5,700.00
AUGMENTIN SUSP 457MG	PER BOTTLE	6,000.00
AUGMENTIN SUSP 642.9MG	PER BOTTLE	6,300.00
AZITHROMYCIN SUSP	PER BOTTLE	2,300.00
BIOFLOR 250MG	PER SACHET	2,300.00
CEFDINIR SUSP 125MG (RANICEF)	PER BOTTLE	5,900.00
CEFDINIR SUSP 250MG	PER BOTTLE	8,700.00
CEFIXIME SUSP 100ML (OCEFIX)	PER BOTTLE	4,800.00
CEFIXIME SUSP 60ML	PER BOTTLE	3,800.00
CEFPODOXIME SUSP 100ML (ORELOX)	PER BOTTLE	10,500.00
CEFPODOXIME SUSP 50ML (ORELOX)	PER BOTTLE	8,300.00
CEFPODOXIME SUSP (CEPODEM)	PER BOTTLE	5,300.00

CEFUROXIME SUSP 125MG	PER BOTTLE	4,500.00
CEFUROXIME SUSP 250MG	PER BOTTLE	6,000.00
CLINDAMYCIN SUSP	PER BOTTLE	6,800.00
ERYTHROMYCIN SUSP 125MG	PER BOTTLE	1,600.00
ERYTHROMYCIN SUSP 250MG	PER BOTTLE	2,300.00
FLAGYL SUSP	PER BOTTLE	1,200.00
FLEMING SUSP 228.5MG	PER BOTTLE	5,200.00
FLEMING SUSP 457MG	PER BOTTLE	7,700.00
FLUMOX SUSP 250MG	PER BOTTLE	5,700.00
LINCOMYCIN SUSP	PER BOTTLE	5,900.00
SEPTRIN SUSP	PER BOTTLE	1,400.00
SPORIDEX SUSP(CEPHALEXIN SUSP 125MG)	PER BOTTLE	2,300.00
SPORIDEX SUSP(CEPHALEXIN SUSP 250MG)	PER BOTTLE	2,900.00
SUITROX SUSP (AZITHROMYCIN)	PER BOTTLE	6,000.00
ZINNAT SUSP 125MG (50ML)	PER BOTTLE	9,000.00
ZINNAT SUSP 125MG (100ML)	PER BOTTLE	12,500.00
ZITHROMAX SUSP	PER BOTTLE	10,700.00
ANTI-FUNGAL		
CLOTRIMAZOLE PESSARY (100MG)	6 TABS	2,400.00
CANDID V1 500MG PESSARY	PER TAB	3,000.00
CLOTRIMAZOLE+CLINDAMYCIN PESSARY	7 TABS	4,500.00
DIFLUCAN CAP 50MG	3 CAPS	9,000.00
FLUCONAZOLE CAP 50MG (FLUCAMED)	10 CAPS	2,700.00
FLUCONAZOLE CAP 50MG	10 CAPS	1,100.00
FLUCONAZOLE CAP 150MG	10 CAPS	1,400.00
FLUCONAZOLE CAP 200MG (FLUCAMED)	10 CAPS	5,400.00
FLUCONAZOLE INFUSION 200MG	PER VIAL	1,500.00
FLUCONAZOLE SUSPENSION	PER BOTTLE	2,400.00
GRISEOFULVIN TAB 500MG	PER TAB	100.00
GYNO-TIOCOSID VAGINAL TAB	3 TABS	3,300.00
GYNO-DAKTARIN VAGINAL TAB 200MG	7 TABS	13,500.00
GYNO-DAKTARIN VAGINAL TAB 400MG	3 TABS	15,500.00
ITRACONAZOLE CAPS 100MG (SPORANOX)	15 CAPS	34,000.00
ITRACONAZOLE CAP 100MG	PER CAP	330
KETOCONAZOLE TAB 200MG	10 TABS	1,800.00
KETOCONAZOLE TAB 200MG (KETO FUNG)	10 TABS	3,700.00
KLOVINAL PESSARY	6 TABS	6,200.00
NEO-PENOTRAN FORTE PESSARY	PER TAB	2,000.00
NYSTATIN SUSP	PER BOTTLE	2,300.00
NYSTATIN VAGINAL TAB	10 TABS	4,600.00
NYSTATIN TAB 500,000IU	10 TABS	2,400.00
REFUCIL SUSP	PER BOTTLE	2,300.00
TERBINAFFINE TAB 250MG (TABASIL)	14 TABS	3,800.00
TERBINAFFINE TAB 250MG (LAMISIL)	14 TABS	81,900.00
VORICONAZOLE INJ 200MG	PER VIAL	53,100.00
VORICONAZOLE TAB 200MG	28 TABS	485,200.00
ANTI INFECTIVES / ANTIBIOTICS		

AMIKACIN INJ 500MG	PER VIAL	2,000.00
AMOKSIKLAV TAB 375MG	14 TABS	4,500.00
AMOXIL CAP 250MG	10 CAPS	900.00
AMOXIL CAP 500MG	10 CAPS	1,300.00
AMOXIL INJ 500MG	PER VIAL	1,600.00
AMPICLOX CAP 500MG	10 CAPS	1,200.00
AMPICLOX INJ 500MG	PER VIAL	1,400.00
AMOXCLAV INJ 600MG (AMOVIN)	PER VIAL	2,400.00
AMOXCLAV INJ 1.2G (ENHANCIN)	PER VIAL	3,500.00
AQUACLAV TAB 375MG	14 TABS	3,800.00
AUGMENTIN INJ 1.2G	PER VIAL	3,800.00
AUGMENTIN TAB 375MG	14 TABS	11,300.00
AUGMENTIN TAB 625MG	14 TABS	17,300.00
AUGMENTIN TAB 1G	14 TABS	18,900.00
AUGMENTIN TAB 1G (GAMOK)	14 TABS	6,000.00
AUGMENTIN TAB 625G (GAMOK)	14 TABS	5,300.00
AZITHROMYCIN CAP 250MG	10 CAPS	3,000.00
AZITHROMYCIN CAP 500MG	10 CAPS	4,100.00
AZITHROMYCIN CAP 250MG (ZITHROMAX)	6 CAPS	16,700.00
CEFACLOR CAP 375MG	10 CAPS	9,000.00
CEFACLOR CAP 500MG	10 CAPS	10,700.00
CEFACLOR CAP 750MG	10 CAPS	12,000.00
CEFDINIR TAB 300MG	10 TABS	9,000.00
CEFEPIME INJ 1G (IV slowly over 30mins)	PER VIAL	7,500.00
CEFIXIME TAB 200MG	10 TABS	4,700.00
CEFIXIME TAB 400MG	10 TABS	8,300.00
CEFPODOXIME TAB 100MG (ORELOX)	10 TABS	7,200.00
CEFPODOXIME TAB 200MG (ORELOX)	10 TABS	10,800.00
CEFTAZIDIME INJ 1G	PER VIAL	3,300.00
CEFTRIAXONE INJ 1G	PER VIAL	2,700.00
CEFTRIAXONE INJ 2G (OCEXONE)	PER VIAL	9,000.00
CEFUROXIME INJ 750MG	PER VIAL	2,300.00
CEFUROXIME TAB 250MG	10 TABS	3,000.00
CEFUROXIME TAB 500MG	10 TABS	5,300.00
CEPODEM TAB 200MG	10 TABS	6,000.00
CHLORAMPHENICOL CAP 250MG	PER CAP	90.00
CIFRAN TAB 500MG	PER TAB	200.00
CIPROFLOXACIN INFUSION 200MG	PER VIAL	1,200.00
CIPROFLOXACIN TAB 500MG PVT	14 TABS	5,000.00
CIPROTAB-TN TAB 500/600MG (CIPROFLOXACIN+TINIDAZOLE)	10 TABS	4,500.00
CLARITHROMYCIN TAB 250MG	10 TABS	3,500.00
CLARITHROMYCIN TAB 500MG	14 TABS	6,000.00
CLINDAMYCIN CAP 300MG (DALACIN-C)	16 CAPS	15,000.00
CLINDAMYCIN CAP 150MG (DALACIN-C)	10 CAPS	4,700.00
CLINDAMYCIN CAP 150MG	10 CAPS	2,000.00
CLINDAMYCIN CAP 300MG	10 CAPS	2,300.00
CLINDAMYCIN INJ 300MG (DALACIN-C)	PER VIAL	7,800.00
DOXYCYCLINE CAP 100MG (DOXYCAP)	PER CAP	130.00
DOXYCYCLINE CAP 100MG (HMO)	PER CAP	60.00
ERYTHROMYCIN TAB 250MG	10 TABS	1,700.00
ERYTHROMYCIN TAB 500MG (RYCIN) PVT	10 TABS	4,500.00

ERYTHROMYCIN TAB 500MG	10 TABS	2,000.00
FLAGYL INFUSION 200MG	PER VIAL	900.00
FLAGYL TAB 200MG	PER TAB	20.00
FLAGYL TAB 400MG	PER TAB	30.00
FLOXAPEN CAP (FLUCLOXACILLIN) 500MG	10 CAPS	8,300.00
FLUMOX CAP 500MG	10 CAPS	3,800.00
FLUMOX INJ 1G (FLUCLOXACILLIN+AMOXICILLIN)	PER VIAL	4,200.00
FORTUM INJ 1G	PER VIAL	9,000.00
GEMFLOXACIN TAB 400MG	PER TAB	2,000.00
GENTAMYCIN INJ 80MG	PER AMP	300.00
IMIPENEM+CILASTATIN INFUSION 500MG (BACQUIRE)	PER VIAL	10,500.00
IMBACT-OZ TAB 500/500MG (LEVOFLOXACIN+ORNIDAZOLE)	10 TABS	4,200.00
LEVOFLOXACIN INFUSION 500MG (TAVANIC)	PER VIAL	28,500.00
LEVOFLOXACIN INFUSION 500MG	PER VIAL	1,400.00
LEVOFLOXACIN TAB 500MG (TAVANIC)	5 TABS	28,700.00
LEVOFLOXACIN TAB 500MG	10 TABS	1,800.00
LEVOFLOXACIN TAB 750MG	10 TABS	6,000.00
LINCOMYCIN CAP 500MG	10 CAPS	2,300.00
LINCOMYCIN INJ 600MG	PER AMP	3,500.00
LINEZOLID TAB 600MG	10 TABS	6,800.00
MERONEM INJ 500MG	PER VIAL	28,500.00
MERONEM INJ 1G	PER VIAL	48,600.00
MEROPENEM INJ 500MG (NURONEM)	PER VIAL	13,500.00
MEROPENEM INJ 1G (NURONEM)	PER VIAL	15,800.00
MOXIFLOXACIN TAB 400MG (MOXIGET)	5 TABS	8,800.00
MOXIFLOXACIN TAB 400MG	10 TABS	3,000.00
MOXIFLOXACIN INFUSION 400MG (MOXIGET)	PER VIAL	15,100.00
NITROFURANTOIN TAB 100MG	PER TAB	100.00
NORFLOXACIN TAB 400MG	PER TAB	520.00
OFLOXACIN TAB 200MG	10 TABS	1,500.00
OFLOXACIN TAB 200MG (TARIVID)	10 TABS	12,750.00
OFLOXACIN TAB 400MG	10 TABS	1,700.00
OFLOXACIN INFUSION 200MG	PER VIAL	1,100.00
ORNILOX TAB 500MG/200MG	10 TABS	4,500.00
PEFLOXACIN TAB 400MG	10 TABS	4,300.00
ROCEPHIN INJ 1G	PER VIAL	13,500.00
SECNIDAZOLE TAB 500MG	4 TABS	1,400.00
SECNIDAZOLE TAB 500MG (FLAGENTYL)	4 TABS	2,100.00
SEPTRIN TAB 480MG	10 TABS	600.00
SEPTRIN TAB 960MG	10 TABS	1,100.00
SPARFLOXACIN TAB 200MG (SPARDIUM)	6 TABS	5,700.00
SPARFLOXACIN TAB 200MG	10 TABS	1,800.00
SPIRACIN TAB	10 TABS	10,500.00
SPORIDEX/CEPHALEXIN CAP 500MG	10 CAPS	2,300.00
STERI TIN	PER PIECE	600.00
TAZOCIN INJ 4.5G	PER VIAL	36,800.00
TETRACYCLINE CAP 250MG	10 CAPS	600.00
TINIDAZOLE INFUSION 200MG	PER VIAL	2,000.00
UNASYN INJ	PER VIAL	8,300.00
UNASYN TAB 375MG	10 TABS	10,500.00
VANCOMYCIN INJ 1G	PER VIAL	5,700.00

ZINNAT INJ 750MG	PER VIAL	2,300.00
ZINNAT TAB 250MG	10 TABS	14,300.00
ZINNAT TAB 500MG	10 TABS	18,000.00
ANTIHELMINTHES		
ALBENDAZOLE SUSP	PER BOTTLE	800.00
ALBENDAZOLE TAB 200MG	2 TABS	400.00
CENOCIDE TAB 50MG	PER TAB	300.00
IVERMECTIN TAB 3MG	PER TAB	200.00
LEVAMIZOLE TAB 40MG	PER TAB	400.00
LEVAMIZOLE SYR	PER BOTTLE	1,800.00
MEBENDAZOLE TAB 100MG	6 TABS	2,000.00
MEBENDAZOLE TAB 500MG	PER TAB	1,800.00
PYRANTEL PAMOATE SUSP	PER BOTTLE	1,700.00
PYRANTEL PAMOATE TAB 250MG	6 TABS	2,000.00
PRAZIQUANTEL TAB 600MG	10 TABS	5,300.00
ANTI RETROVIRAL/ ANTIVIRAL		
ACYCLOVIR TAB 200MG	25 TABS	10,500.00
ACYCLOVIR TAB 400MG	25 TABS	18,000.00
AVOCOMB TAB (ZIDOVUDINE+LAMIVUDINE)	PER PACK	27,000.00
AVOCOMB-N TAB(ZIDOVUDINE+LAMIVUDINE+NEVIRAPINE)	PER PACK	33,000.00
DOLUTEGRAVIR TAB 50MG	PER PACK	27,000.00
LAMIVUDINE SYR 150MG	PER BOTTLE	13,500.00
LAMIVUDINE TAB 150MG	PER PACK	15,000.00
NEVIRAPINE SYR	PER BOTTLE	15,000.00
NEVIRAPINE TAB 200MG	PER PACK	15,000.00
PEGINTERFERON ALFA-2A 180MCG	PER AMP	83,000.00
RIBAVIRIN CAP 400MG	10 CAPS	11,500.00
RIBAVIRIN CAP 500MG	10 CAPS	9,600.00
STAVUDINE TAB	PER PACK	15,000.00
TELBIVUDINE TAB 600MG	PER PACK	450,000.00
TENOFOVIR+LAMIVUDINE+DOLUTEGRAVIR	PER PACK	9,750.00
TENOFOVIR TAB 300MG	PER PACK	15,000.00
TRIVIRO TAB (STAVUDINE+LAMIVUDINE+NEVIRAPINE)	PER PACK	45,000.00
VALACYCLOVIR TAB 500MG	PER TAB	19,000.00
ZIDOVUDINE+LAMIVUDINE+EFAVIRENZ	PER PACK	22,500.00
ZIDOVUDINE SYR	PER BOTTLE	15,800.00
ZIDOVUDINE TAB 150MG	PER TAB	15,000.00
ANALGESICS / ORTHOPAEDIC DRUGS		
ACECLOFENAC TAB 100MG	10 TABS	2,100.00
ACECLOFENAC TAB 200MG	10 TABS	2,600.00
ANKLE BRACE	PER PIECE	8,500.00
ANTALGEX T CAP 325/37.5MG (PCM+TRAMADOL)	10 CAPS	3,300.00
ARTHOCARE FORTE TAB	30 TABS	15,300.00
ARTHOCARE CAP	30 CAPS	9,200.00
ARTHROTEC TAB 75MG (DICLOFENAC+MISOPROSTOL)	10 TABS	3,800.00

ASPIRIN TAB 300MG	PER TAB	200.00
BILATERAL CRUTCHES	PER PAIR	15,000.00
BIOPENTIN TAB	10 TABS	2,700.00
BROAD ARM SLING (ADULT)	PER PIECE	5,500.00
BROAD ARM SLING (PAED)	PER PIECE	7,500.00
CAFERGOT TAB	10 TABS	4,500.00
CATAFLAM SUSP	PER BOTTLE	10,500.00
CATAFLAM TAB 50MG	10 TABS	4,200.00
CELEBREX CAP 200MG	10 CAPS	11,600.00
CELECOXIB TAB 200MG (EXXIB)	10 TABS	5,100.00
CELECOXIB TAB 200MG	10 TABS	2,300.00
CELECOXIB CAP 400MG	10 TABS	9,000.00
CERVICAL COLLAR	PER PIECE	4,500.00
CHYMORAL INJECTION	PER AMP	2,500.00
CHYMORAL TAB	10 TABS	600.00
COCODAMOL TAB 8/500MG (CODEINE+PCM)	10 TABS	2,100.00
CREPE BANDAGE 2"	PER PIECE	600.00
CREPE BANDAGE 4"	PER PIECE	800.00
CREPE BANDAGE 6"	PER PIECE	1,000.00
DEPO MEDROL INJ	PER VIAL	2,600.00
DICLOFENAC INJ 75MG	PER AMP	300.00
DICLOFENAC SUPP 12.5MG	PER SUPP	700.00
DICLOFENAC SUPP 50MG	PER SUPP	1,600.00
DICLOFENAC SUPP 100MG	PER SUPP	1,800.00
DICLOFENAC TAB 100MG	10 TABS	800.00
DICLOFENAC TAB 50MG	10 TABS	400.00
DOLO-META B TAB	10 TABS	1,000.00
EPROXEN TAB 20/500MG (ESOMEPRAZOLE+NAPROXEN)	10 TABS	4,100.00
FLOTAC CAP 75MG	20 CAPS	16,000.00
GABAPENTIN CAP 100MG	10 CAPS	2,600.00
GABAPENTIN CAP 300MG	10 CAPS	4,900.00
IBUPROFEN TAB 200MG	10 TABS	200.00
IBUPROFEN TAB 400MG	10 TABS	500.00
IBUPROFEN SUSP	PER BOTTLE	1,400.00
INDOMETHACIN CAP 25MG	PER CAP	50.00
KETOPROFEN CAP 20MG	10 CAPS	6,300.00
KNEE BRACE	PER PIECE	7,500.00
KOTASE TAB	10 TABS	1,700.00
LUMBAR SUPPORT	PER PIECE	9,800.00
LYRICA (PREBAGALIN) CAP 25MG	28 CAPS	19,800.00
LYRICA (PREBAGALIN) CAP 75MG	28 CAPS	34,100.00
LYRICA (PREGABALIN) CAP 150MG	28 CAPS	35,300.00
MEFENAMIC ACID TAB 250MG	10 TABS	1,400.00
MEFENAMIC ACID TAB 500MG	10 TABS	1,800.00
MELOXICAM TAB 7.5MG	10 TABS	1,600.00
MELOXICAM TAB 15MG	PER TAB	1,800.00
MELOXICAM INJ 15MG	PER AMP	2,000.00
NAPROXEN TAB 500MG	20 TABS	3,150.00
NEFOPAM INJ 20MG	PER AMP	1,800.00
NORGESIC TAB 35/450MG (ORPHENADRINE+PCM)	PER TAB	140.00
NUROFEN CAP 400MG	12 CAPS	6,600.00

NUROFEN SUSP	PER BOTTLE	5,700.00
OLFEN TAB 75MG (DICLOFENAC)	10 TABS	5,300.00
ORPHENADRINE TAB 100MG	PER TAB	200.00
PARACETAMOL CHEWABLE	PER TAB	120.00
PARACETAMOL INJ 300MG	PER AMP	200.00
PARACETAMOL SYR	PER BOTTLE	1,000.00
PARACETAMOL TAB 500MG	12 TABS	250.00
PENTAZOCINE INJ 30MG	PER AMP	900.00
PHENYRAMIDOL TAB 400MG	PER TAB	120.00
PIROXICAM CAP 20MG (FLEXICAM)	PER CAP	450.00
PIROXICAM CAP 20MG	PER CAP	100.00
PIROXICAM INJ	PER AMP	600.00
P.O.P 4"	PER PIECE	1,300.00
P.O.P 6"	PER PIECE	1,800.00
P.O.P 8"	PER PIECE	1,800.00
PREGABALIN CAP 75MG	30 CAPS	5,300.00
PREGABALIN CAP 150MG	30 CAPS	7,300.00
RELEV PROTEC TAB 500MG	10 TABS	3,800.00
ROM KNEE BRACE	PER PIECE	128,000.00
ROSTREC TAB 75MG (DICLOFENAC+MISOPROSTOL)	10 TABS	1,700.00
SOFFBAN 4"	PER ROLL	900.00
SOFFBAN 6"	PER ROLL	1,200.00
TED STOCKINGS	PER PACK	12,800.00
TENOXICAM CAP 20MG	10 CAPS	3,000.00
TIZANIDINE TAB 2MG	10 TABS	3,000.00
TIZANIDINE TAB 2MG (SIRDALUD)	10 TABS	4,900.00
TIZANIDINETAB 4MG (SIRDALUD)	10 TABS	9,150.00
TRAMADOL CAP 50MG	10 CAPS	2,700.00
TRAMADOL INJ 100MG	PER AMP	1,200.00
VOLTAREN SUPP 12.5MG	PER SUPP	1,900.00
VOLTAREN SUPP 50MG	PER SUPP	2,100.00
VOLTAREN SUPP 100MG	PER SUPP	3,900.00
VOLTAREN TAB 100MG (DICLOFENAC)	10 TABS	1,200.00
WRIST AND FOREARM BRACE	PER PIECE	8,300.00
WRIST SPLINT	PER PIECE	5,300.00
GASTRO INTESTINAL DRUGS		
ANUSOL SUPP	PER SUPP	1,000.00
BIOFLOR	PER SACHET	1,000.00
BISACODYL SUPP 10MG (DUCOLAX)	PER SUPP	1,800.00
BISACODYL TAB 5MG	PER TAB	20.00
BISACODYL TAB 5MG (DUCOLAX)	PER TAB	1,000.00
BUSCOPAN INJ 10MG	PER AMP	300.00
BUSCOPAN SYR	PER BOTTLE	1,000.00
BUSCOPAN TAB 10MG	PER TAB	40.00
CIMETIDINE INJ 200MG	PER AMP	300.00
CIMETIDINE TAB 200MG	10 TABS	1,000.00
CIMETIDINE TAB 400MG	10 TABS	1,500.00
DAFLON TAB 500MG	30 TABS	12,800.00
DEXRABEPRAZOLE TAB 10MG	10 TABS	2,300.00

EPSOM SALT	PER SACHET	1,800.00
ESOMEPRAZOLE CAP 20MG	10 CAPS	4,500.00
ESOMPRAZOLE CAP 40MG	10 CAPS	6,800.00
ESOMEPRAZOLE CAP 20MG (NEXIUM)	14 CAPS	30,500.00
ESOMEPRAZOLE CAP 40MG (NEXIUM)	14 CAPS	40,500.00
ESOMEPRAZOLE INJ 40MG (NEXIUM)	PER VIAL	35,300.00
FAMOTIDINE TAB 40MG	10 TABS	4,500.00
FLORANORM	PER SACHET	2,000.00
GASCOL SUSP 150ML	PER BOTTLE	1,900.00
GASCOL TAB	6 TABS	500.00
GAVISCON SUSP 150ML	PER BOTTLE	11,000.00
GAVISCON SUSP 150ML (DOUBLE STRENGTH)	PER BOTTLE	11,000.00
GERDICID TAB (FAMOTIDINE+MAGNESIUM HYDROXIDE+CALCIUM CARBONATE)	4 TABS	1,300.00
GETZOME CAP 20MG	14 CAPSULES	3,000.00
GETZOME CAP 40MG	14 CAPSULES	5,600.00
GETZOME INSTA 20/1680MG (OMEPRAZOLE+SODIUM BICARBONATE)	PER PACK	9,500.00
GETZOME INSTA 40/1680MG	PER PACK	12,600.00
IMODIUM CAP 2MG	6 CAPS	4,500.00
LACTULOSE	PER BOTTLE	3,000.00
LIQUID PARAFFIN	PER BOTTLE	2,000.00
LOPERAMIDE CAP 2MG	PER CAP	40.00
MAXOLONE INJ 10MG	PER DOSE	300.00
MAXOLONE TAB	PER TAB	40.00
MIST KAOLIN	PER BOTTLE	1,700.00
MMT SUSP /POLYCAINE	PER BOTTLE	1,600.00
MMT TAB	10 TABS	150.00
MOTILIUM TAB 10MG	30 TABS	7,650.00
NO-SPA INJ	PER AMP	2,700.00
NO-SPA TAB 40MG	PER TAB	1,200.00
OMEPRAZOLE CAP 20MG	10 CAPS	1,900.00
OMEPRAZOLE CAP 40MG	10 CAPS	3,200.00
OMEPRAZOLE CAP 40MG (GETZLOX)	10 CAPS	7,360.00
OMEPRAZOLE INJ 40MG	PER VIAL	1,200.00
PANTOPRAZOLE INJ 40MG	PER VIAL	3,800.00
PANTOPRAZOLE TAB 40MG	10 TABS	4,800.00
PARIET TAB 20MG	14 TABS	21,300.00
PEPFIZ	PER SACHET	1,500.00
PEPTO BISMUTH	PER BOTTLE	4,500.00
PROMETHAZINE INJ 50MG	PER AMP	300.00
PROMETHAZINE SYR	PER BOTTLE	1,300.00
PROMETHAZINE TAB 25MG	PER TAB	20.00
RABEPRAZOLE INJ 20MG	PER VIAL	3,900.00
RABEPRAZOLE TAB 20MG	10 TABS	2,700.00
RANITIDINE INJ	PER AMP	1,800.00
RANITIDINE TAB 150MG	10 TABS	2,300.00
SCHERIPROCT SUPP	PER SUPP	3,800.00
STUGERON TAB 25MG	PER TAB	200.00
SUPER MAG	PER BOTTLE	1,400.00
SUCRALFATE TAB 100MG	PER TAB	1,600.00

CARDIOLOGY DRUGS		
ACETYLSALICYLIC ACID TAB 75MG (ASA)	PER TAB	10.00
AMIODARONE TAB 200MG	10 TABS	2,300.00
AMLODIPINE TAB 5MG	PER TAB	80.00
AMLODIPINE TAB 5MG (NORVASC)	PER TAB	540.00
AMLODIPINE TAB 10MG (NORVASC)	PER TAB	1,000.00
AMLODIPINE TAB 10MG	PER TAB	120.00
APROVASC TAB 150/5MG (IRBESARTAN+AMLODIPINE)	28 TABS	21,300.00
APROVASC TAB 150/10MG	28 TABS	23,600.00
APROVASC TAB 300/5MG	28 TABS	35,600.00
APROVASC TAB 300/10MG	28 TABS	37,800.00
APROVEL TAB 150MG (IRBESARTAN)	28 TABS	17,100.00
APROVEL TAB 300MG	28 TABS	21,300.00
ASOMEX TAB 2.5MG (S-AMLODIPINE)	30 TABS	5,400.00
ASOMEX TAB 5MG	30 TABS	9,900.00
ATACAND PLUS TAB 16/12.5MG (CANDESARTAN+HCT)	28 TABS	55,900.00
ATACAND PLUS TAB 32/12.5MG	28 TABS	85,600.00
ATACAND TAB 8MG (CANDESARTAN)	28 TABS	41,000.00
ATACAND TAB 16MG	28 TABS	55,900.00
ATACAND TAB 32MG	28 TABS	85,600.00
ATORVASTATIN TAB 10MG	30 TABS	1,800.00
ATORVASTATIN TAB 20MG	30 TABS	2,600.00
ATORVASTATIN TAB 40MG	30 TABS	4,400.00
ATENOLOL TAB 100MG	PER TAB	70.00
ATENOLOL TAB 50MG	PER TAB	50.00
BENDROFLUTHIAZIDE TAB 2.5MG	PER TAB	180.00
BISOPROLOL TAB 2.5MG	PER TAB	120.00
BISOPROLOL TAB 5MG	PER TAB	190.00
BISOPROLOL TAB 10MG (CONCOR)	30 TABS	14,400.00
BISOPROLOL TAB 5MG (CONCOR)	30 TABS	11,900.00
BISOPROLOL TAB 2.5MG (CONCOR)	30 TABS	8,900.00
BRINERDIN TAB	10 TABS	3,000.00
CADUET TAB 5/10MG (AMLODIPINE+ATORVASTATIN)	30 TABS	34,800.00
CADUET TAB 10/10MG	30 TABS	34,800.00
CANDERSARTAN TAB 8MG	28 TABS	8,800.00
CANDESARTAN TAB 16MG	28 TABS	10,200.00
CARVEDILOL TAB 3.125mg	PER TAB	70.00
CARVEDILOL TAB 6.25MG	PER TAB	90.00
CARVEDILOL TAB 12.5MG	PER TAB	130.00
CHOLESTYRAMINE	PER SACHET	1,800.00
CLEXANE INJ 20MG	PER PFS	7,500.00
CLEXANE INJ 40MG	PER PFS	14,000.00
CLEXANE INJ 60MG	PER PFS	13,200.00
CLEXANE INJ 80MG	PER PFS	15,000.00
CLOPIDOGREL TAB 75MG	PER TAB	200.00
CO-APROVEL TAB 150/12.5MG IRBESARTAN+HCT)	28 TABS	27,300.00
CO-APROVEL TAB 300/12.5MG	28 TABS	31,700.00
CO-APROVEL TAB 300/25MG	28 TABS	31,700.00
CO-DIOVAN TAB 80MG	28 TABS	39,000.00
CO-DIOVAN TAB 160MG	28 TABS	46,700.00
CO-DIOVAN TAB 320MG	28 TABS	51,000.00

CO-MICARDIS TAB 40MG	28 TABS	24,800.00
CO-MICARDIS TAB 80MG	28 TABS	30,000.00
COVERAM PLUS TAB (PERINDOPRIL+AMLODIPINE+INDAPAMIDE)	30 TABS	36,000.00
COVERAM TAB (PERINDOPRIL+AMLODIPINE)	30 TABS	29,300.00
COVERSYL PLUS TAB (PERINDOPRIL+INDAPAMIDE)	30 TABS	29,300.00
COVERSYL TAB (PERINDOPRIL)	30 TABS	28,500.00
CRESTOR TAB 5MG (ROSUVASTATIN)	28 TABS	36,400.00
CRESTOR TAB 10MG	28 TABS	39,600.00
CRESTOR TAB 20MG	28 TABS	57,100.00
DABIGATRAN TAB 110MG	PER TAB	2,600.00
DABIGATRAN TAB 150MG	PER TAB	3,200.00
DOPAMINE INJ	PER AMP	1,400.00
DIGOXIN TAB 0.25MG	10 TABS	2,300.00
DIOVAN TAB 80MG	28 TABS	38,850.00
DIOVAN TAB 160MG (VALSARTAN)	28 TABS	46,700.00
ENCHEPHABOL TAB 100MG	PER TAB	500.00
ENALAPRIL TAB 10MG	30 TABS	9,000.00
ENALAPRIL TAB 5MG	30 TABS	6,800.00
EXFORGE TAB 10/160MG (AMLODIPINE+VALSARTAN)	28 TABS	58,600.00
EXFORGE TAB 5/160MG	28 TABS	55,100.00
EXFORGE TAB 10/320MG	28 TABS	68,500.00
GLYCERYL TRINITRATE TAB 500MG	10 TABS	2,700.00
HYDRALAZINE INJ 40MG	PER AMP	600.00
HYDRALAZINE TAB 25MG	PER TAB	120.00
HYDROCHLOROTHIAZIDE TAB 25MG	PER TAB	40.00
INDAPAMIDE TAB 1.5MG (NATRILIX)	30 TABS	11,300.00
INDAPAMIDE TAB 1.5MG (PRONALIX)	30 TABS	6,900.00
INDERAL (PROPANOLOL) TAB 40MG	30 TABS	12,400.00
ISORDIL TAB 5MG	PER TAB	60.00
LABETALOL INJ	PER AMP	3,800.00
LABETALOL TAB 200MG	10 TABS	3,000.00
LASIX INJ 20MG	PER AMP	200.00
LASIX TAB 40MG	PER TAB	40.00
LEVODOPA+CARBIDOPA TAB 250/25MG (SINEMET)	10 TABS	10,500.00
LEVODOPA+CARBIDOPA TAB 250/25MG (PARDOPA)	10 TABS	4,700.00
LIPITOR TAB 10MG (ATORVASTATIN)	30 TABS	34,800.00
LIPITOR TAB 20MG	30 TABS	35,300.00
LIPITOR TAB 40MG	30 TABS	36,000.00
LIPITOR TAB 80MG	30 TABS	37,500.00
LISINOPRIL TAB 2.5MG	28 TABS	1,300.00
LISINOPRIL TAB 5MG	28 TABS	1,500.00
LISINOPRIL TAB 10MG	28 TABS	1,800.00
LOSARTAN TAB 25MG	30 TABS	3,600.00
LOSARTAN TAB 50MG	30 TABS	4,800.00
LOSARTAN TAB 100MG	30 TABS	6,800.00
METHYLDOPA TAB 250MG (ALDOMET)	10 TABS	2,700.00
METHYLDOPA TAB 250MG	10 TABS	1,200.00
METOPROLOL TAB 25MG	30 TABS	5,100.00
METOPROLOL TAB 50MG	30 TABS	6,300.00
METOPROLOL TAB 25MG (BETALOC)	14 TABS	9,300.00
METOPROLOL TAB 50MG (BETALOC)	30 TABS	27,200.00

METOPROLOL TAB 100MG (BETALOC)	30 TABS	33,570.00
METZOZ TAB 2.5MG (METOLAZONE)	10 TABS	3,300.00
METZOZ TAB 5MG	10 TABS	5,700.00
MICARDIS TAB 40MG (TELMISARTAN)	28 TABS	24,800.00
MICARDIS TAB 80MG	28 TABS	30,000.00
MINIZIDE TAB	10 TABS	3,800.00
MODURETIC TAB 5/50MG	PER TAB	50.00
NATRIXAM TAB 1.5/5MG (INDAPAMIDE+AMLODIPINE)	30 TABS	12,000.00
NATRIXAM TAB 1.5/10MG	30 TABS	12,500.00
NEBIVOLOL TAB 5MG	30 TABS	6,000.00
NICOTINIC ACID TAB	PER TAB	440.00
NIFECARD XL TAB 30MG	30 TABS	11,300.00
NIFEDIPINE TAB 20MG	PER TAB	70.00
NORMORETIC TAB 5/50MG (AMILORIDE+HCT)	PER TAB	70.00
OLMESARTAN TAB 20MG	PER TAB	500.00
OLMESARTAN TAB 40MG	PER TAB	700.00
PLENDIL TAB 10MG (FELODIPINE)	30 TABS	62,100.00
PLENDIL TAB 5MG	30 TABS	56,620.00
PRAZOSIN TAB 1MG	PER TAB	600.00
PROPRANOLOL TAB 40MG	PER TAB	100.00
RAMIPRIL TAB 5MG	30 TABS	2,400.00
ROSUVASTATIN TAB 5MG	30 TABS	4,400.00
ROSUVASTATIN TAB 10MG	30 TABS	6,000.00
ROSUVASTATIN TAB 20MG	30 TABS	10,200.00
SILDENAFIL TAB 50MG	4 TABS	2,000.00
SILDENAFIL TAB 50MG (VIAGRA)	4 TABS	24,200.00
SIMVOR TAB 10MG (SIMVASTATIN)	10 TABS	3,000.00
SIMVOR TAB 20MG	10 TABS	4,100.00
SIMVOR TAB 40MG	10 TABS	5,400.00
SPIRINOLACTONE TAB 25MG (ALDACTONE)	10 TABS	3,300.00
SPIRINOLACTONE TAB 25MG	PER TAB	110.00
TELMISARTAN TAB 40MG	30 TABS	6,000.00
TELMISARTAN TAB 80MG	30 TABS	7,200.00
TELSARTAM TAB 40/5MG (TELMISARTAN+AMLODIPINE)	28 TABS	7,500.00
TELSARTAM-HCT TAB 40/5/12.5MG (TELMISARTAN+AMLODIPINE+HCT)	28 TABS	8,550.00
TENORET TAB 50MG	28 TABS	22,575.00
TENORETIC TAB 100/25MG (ATENOLOL+CHLORTHALIDONE)	14 TABS	18,405.00
TENORMIN TAB 100MG (ATENOLOL)	28 TABS	30,000.00
THIAPRIL TAB 5/12.5MG (RAMIPRIL+HCT)	30 TABS	4,200.00
TORSEMIDE TAB 10MG	10 TABS	2,300.00
TORSEMIDE TAB 20MG	10 TABS	3,000.00
TORSEMIDE INJ 20MG	PER AMP	1,000.00
TRITACE TAB 2.5MG	28 TABS	11,300.00
TRITACE TAB 5MG	28 TABS	16,000.00
TRITACE TAB 10MG (RAMIPRIL)	28 TABS	15,900.00
TRITAZIDE TAB	PER TAB	16,200.00
UPERIO TAB (VALSARTAN+SACUBITRIL)	28 TABS	64,500.00
VACUTRO TAB 24/26MG (VALSARTAN+SACUBITRIL)	14 TABS	24,000.00
VACUTRO TAB 49/51MG (VALSARTAN+SACUBITRIL)	14 TABS	30,000.00
VACUTRO TAB 97/103MG (VALSARTAN+SACUBITRIL)	14 TABS	40,500.00
VALSARTAN TAB 80MG	28 TABS	11,300.00

VALSARTAN TAB 160MG	28 TABS	16,500.00
VALVAS TAB 5/160MG	30 TABS	19,200.00
VALVAS TAB 10/160MG (AMLODIPINE+VALSARTAN)	30 TABS	19,500.00
VALVAS TAB 10/160MG/12.5MG (AMLODIPINE+VALSARTAN+HCT)	28 TABS	20,300.00
VALVAS TAB 10/160MG/25MG (AMLODIPINE+VALSARTAN+HCT)	28 TABS	20,500.00
WARFARIN TAB 3MG	10 TABS	2,500.00
XARELTO TAB 2.5MG	28 TABS	30,000.00
XARELTO TAB 10MG	10 TABS	22,500.00
XARELTO TAB 15MG	14 TABS	30,000.00
XARELTO TAB 20MG	14 TABS	30,000.00
ZESTORETIC TAB 20/12.5MG (LISINAPRIL+HCT)	28 TABS	33,100.00
ZESTRIL TAB 20MG	28 TABS	33,200.00
ZESTRIL TAB 10MG (LISINAPRIL)	28 TABS	22,400.00
ZESTRIL TAB 5MG (LISINAPRIL)	28 TABS	11,700.00
SEDATIVES / PSYCHOTROPIC/ANTICONVULSANTS DRUGS		
AMITRYPTYLLINE TAB 25MG	PER TAB	30.00
CARBAMAZEPINE TAB 200MG	PER TAB	200.00
CHLORPROMAZINE INJ 50MG	PER AMP	400.00
CHLORPROMAZINE TAB 100MG	PER TAB	100.00
DIAZEPAM INJ 10MG	PER AMP	1,300.00
DIAZEPAM TAB 5MG	PER TAB	20.00
EPILIM CHRONO CAP 500MG	PER CAP	740.00
EPILIM SYR (SODIUM VALPROATE)	PER BOTTLE	32,600.00
EPILIM TAB 200MG	PER TAB	270.00
FLUNITRAZEPAM TAB 1MG	PER TAB	300.00
FLUOXETIN CAP 20MG	PER CAP	300.00
IMIPRAMINE TAB	PER TAB	380.00
LEVETIRACETAM TAB 500MG	PER TAB	1,300.00
LEVETIRACETAM TAB 250MG	PER TAB	1,000.00
LEXOTAN TAB 3MG	PER TAB	80.00
NITRAZEPAM TAB 5MG	PER TAB	130.00
PARALDEHYDE INJ	PER AMP	2,100.00
PAROXETINE TAB 20MG	30 TABS	6,000.00
PHENOBARB INJ	PER AMP	3,000.00
PHENOBARB SYR	PER BOTTLE	1,200.00
PHENOBARB TAB 30MG	PER TAB	60.00
PHENYTOIN INJ	PER AMP	6,800.00
SERTRALINE CAP 50MG (ZOLOFT)	PER CAP	700.00
TEGRETOL CR TAB 200MG	PER TAB	510.00
TEGRETOL CR TAB 400MG	10 TABS	9,900.00
TEGRETOL SYR	PER BOTTLE	21,000.00
TEGRETOL TAB 200MG	PER TAB	450.00
TOPAMAX TAB 25MG	60 TABS	38,100.00
ZOPICLONE TAB 7.5MG	PER TAB	400.00
ANTIDIABETIC AGENT		
ACTRAPID FLEXPEN	PER PEN	12,800.00
AMARYL TAB 1MG (GLIMEPIRIDE)	30 TABS	6,800.00

AMARYL TAB 2MG	30 TABS	16,200.00
AMARYL TAB 4MG	30 TABS	29,000.00
DAPAGLIFLOZIN TAB 10MG (DAPZIN)	30 TABS	18,800.00
DAPAGLIFLOZIN TAB 10MG (FORXIGA)	28 TABS	83,300.00
DIABINESE TAB 250MG (CHLORPROPAMIDE)	PER TAB	600.00
DIAMICRON TAB 30MG (GLICLAZIDE)	30 TABS	12,800.00
DIAMICRON TAB 60MG	30 TABS	22,500.00
EMPIGET-M 12.5/1000MG (EMPAGLIFLOZIN+METFORMIN)	14 TABS	24,000.00
EMPIGET-M 5/500MG (EMPAGLIFLOZIN+METFORMIN)	14 TABS	13,500.00
EMPIGET TAB 10MG (EMPAGLIFLOZIN)	14 TABS	15,800.00
EMPIGET TAB 25MG (EMPAGLIFLOZIN)	14 TABS	23,500.00
GALVUS MET TAB (VILDAGLIPTIN+METFORMIN)	60 TABS	79,500.00
GALVUS TAB 50MG	28 TABS	37,500.00
GLIBENCLAMIDE TAB 5MG	PER TAB	100.00
GLIBENCLAMIDE TAB 5MG (DAONIL)	PER TAB	200.00
GLIMEPIRIDE TAB 2MG	30 TABS	2,700.00
GLIMEPIRIDE TAB 3MG	30 TABS	3,500.00
GLIMEPIRIDE TAB 4MG	30 TABS	4,000.00
GLIPIZIDE TAB 5MG	PER TAB	600.00
GLUCOPHAGE TAB 500MG (METFORMIN)	30 TABS	6,800.00
GLUCOPHAGE XR TAB 750MG	30 TABS	16,200.00
GLUCOPHAGE XR TAB 1000MG	30 TABS	18,500.00
GLUCOVANCE TAB 5/500MG (GLIBENCLAMIDE+METFORMIN)	30 TABS	17,500.00
GLUCOVANCE TAB 5/1000MG	30 TABS	20,900.00
INSULIN 10ML	PER VIAL	23,300.00
KOMBIGLYZE TAB 2.5/1000MG (SAXAGLIPTIN+METFORMIN)	PER TAB	1,200.00
KOMBIGLYZE TAB 5/1000MG	PER TAB	1,500.00
LANTUS SOLOSTAR	PER PEN	15,900.00
LINAGLIPTIN TAB 5MG	30 TABS	21,000.00
LINAGLIPTIN TAB 2.5MG	30 TABS	14,000.00
LINAJEN TAB 2.5/500MG (LINAGLIPTIN+METFORMIN)	30 TABS	14,300.00
LINAJEN TAB 2.5/1000MG	30 TABS	14,700.00
METFORMIN TAB 500MG	PER TAB	40.00
METFORMIN TAB 1000MG	PER TAB	70.00
METFORMIN SR TAB 500MG	30 TABS	3,600.00
METFORMIN SR TAB 1000MG	30 TABS	5,600.00
MIXTARD FLEXPEN	PER PEN	12,800.00
NOVOMIX FLEXPEN	PER PEN	21,000.00
NOVORAPID FLEXPEN	PER PEN	21,300.00
ONGLYZA TAB 2.5MG (SAXAGLIPTIN)	28 TABS	31,500.00
ONGLYZA TAB 5MG	28 TABS	42,000.00
PIOGLITAZONE TAB 15MG	PER TAB	550.00
PIOGLITAZONE TAB 30MG	PER TAB	680.00
TRESIBA FLEXTOUCH	PER PEN	51,000.00
TREVIAMET TAB 50/500MG (SITAGLIPTIN+METFORMIN)	35 TABS	25,200.00
TREVIAMET TAB 50/1000MG	35 TABS	30,000.00
TREVIAMET TAB 50MG (SITAGLIPTIN)	35 TABS	22,000.00
TREVIAMET TAB 100MG	35 TABS	28,300.00
VILGET TAB 50MG (VILDAGLIPTIN)	28 TABS	18,800.00
VILGET-M TAB 50/1000MG (VILDAGLIPTIN+METFORMIN)	14 TABS	20,300.00
VILGET-M TAB 50/850MG (VILDAGLIPTIN+METFORMIN)	35 TABS	19,500.00

GYNAECOLOGICAL DRUGS		
ADDYZOA CAP	20 CAPS	10,800.00
AVODART CAP 0.5MG (DUTASTERIDE)	30 CAPS	12,800.00
BROMOCRIPTINE TAB 2.5MG	30 TABS	14,000.00
CABERGOLINE TAB 0.5MG	PER TAB	2,400.00
C.O.C	PER PACK	1,000.00
CLOMIPHENE TAB 50MG (CLOMID)	10 TABS	12,300.00
CLOMIPHENE TAB 50MG	10 TABS	4,200.00
COPPER T	PER PACK	4,000.00
CYTOTEC TAB 200MCG	PER TAB	600.00
DANAZOL CAP 200MG	PER CAP	1,500.00
DAPOXETINE TAB 20MG	4 TABS	6,000.00
DEPO PROVERA INJ	PER VIAL	2,000.00
DICYNONE INJ 250MG	PER AMP	2,500.00
DOXAZOSIN TAB 4MG	PER TAB	700.00
DUOFEM TAB	PER TAB	1,500.00
DUPHASTON TAB 10MG	10 TABS	9,000.00
ERGOMETRIN INJ	PER AMP	400.00
FINSTAL TAB 5MG (FINASTERIDE)	PER TAB	500.00
GYNAECOSID TAB	PER TAB	2,700.00
HYALURONIDASE INJ	PER VIAL	8,000.00
LETROZOLE TAB 2.5MG	PER TAB	550.00
LUPRODEX INJ 3.75MG	PER VIAL	135,000.00
M2 TONE TAB	20 TABS	
MERSELINE TAPE	PER SUTURE	16,500.00
NORISTERAT INJ 200MG	PER AMP	2,500.00
OSDIL INJ 8MG	PER AMP	2,500.00
OXYTOCIN INJ 10IU (SYNTOCINON)	PER AMP	1,600.00
OXYTOCIN INJ 10IU	PER AMP	320.00
PRIMOLUT-N INJ	PER AMP	4,500.00
PRIMOLUT-N TAB 5MG	30 TABS	9,200.00
PROGESTERONE CAP 200MG	10 CAPS	22,500.00
PROGESTERONE INJ 50MG	PER VIAL	1,800.00
PROSCAR TAB 5MG	30 TABS	5,500.00
PROVIRON TAB 25MG	PER TAB	600.00
SILDENAFIL TAB 50MG	4 TABS	2,000.00
SILDENAFIL TAB 50MG (VIAGRA)	4 TABS	24,200.00
TADALAFIL TAB 10MG	4 TABS	3,000.00
TADALAFIL TAB 20MG	4 TABS	4,200.00
TAMOXIFEN TAB 20MG	PER TAB	400.00
TAMSULOSIN TAB 0.4MG	PER TAB	240.00
TAMSULOSIN+DUTASTERIDE CAP 0.5/0.4MG (DUODART)	30 CAPS	97,500.00
TAMSULOSIN+DUTASTERIDE CAP 0.5/0.4MG	30 CAPS	12,000.00
TESTOSTERONE INJ 1G	PER VIAL	9,000.00
TRANEXAMIC ACID CAP 250MG	10 CAPS	2,700.00
TRANEXAMIC ACID CAP 500MG	10 CAPS	3,800.00
TRANEXAMIC INJ 500MG	PER AMP	1,600.00
XATRAL CAP 10MG (ALFUZOSIN)	30 TABS	67,500.00
ZOLADEX INJ 3.6MG	PER VIAL	244,500.00

ZOLADEX INJ 10.8MG	PER VIAL	579,200.00
HEAMATINICS/VITAMINS AND MINERAL SUPPLEMENTS		
ASTYFER CAP	30 CAPS	4,950.00
ASTYMIN CAP	20 CAPS	4,950.00
ASTYMIN INFUSION	PER VIAL	13,200.00
CA-C 1000 TAB	10 TABS	4,000.00
CALCIUM INJ	PER VIAL	1,000.00
CALCIUM TAB 300MG	14 TABS	100.00
CALGOVIT TAB	20 TABS	3,300.00
DOLOMETA B	10 TABS	1,400.00
DYNAMOGEN ORAL SOLUTION	PER AMP	1,000.00
ELDERVIT 1&2 INJ	PER DOSE	3,000.00
ERYTHROPOETIN 4000IU (EPREX)	PER DOSE	40,500.00
ERYTHROPOETIN INJ 4000IU	PER DOSE	19,500.00
FERROUS SULPHATE TAB 200MG	14 TABS	100.00
FOLIC ACID TAB 5MG	14 TABS	100.00
FOURTS B CAP	30 CAPS	2,300.00
GINSOMIN CAP	30 CAPS	9,800.00
POTASSIUM CHLORIDE INJ	PER AMP	1,200.00
HAEMACCEL INFUSION	PER PINT	31,500.00
HAEMARON CAP	30 CAPS	1,000.00
IDEOS TAB	30 TABS	11,300.00
IRON SUCROSE 20MG	PER AMP	2,400.00
LIVOLIN CAP	30 CAPS	13,500.00
MAGNESIUM SULPHATE INJ	PER AMP	1,300.00
MECONERV FORTE CAP	30 CAPS	11,300.00
MEDITROL CAPS	30 CAPS	10,800.00
MEGA CALCIUM TAB	10 TABS	2,500.00
M/VITE TAB	14 TABS	100.00
NEUROBION TAB	20 TABS	9,000.00
NEUROVITE FORTE TAB	10 TABS	2,100.00
PREGNACARE	30 CAPS	13,000.00
RENERVE PLUS CAP	30 CAPS	13,500.00
SLOW K TAB 600MG	10 TABS	3,000.00
SODIUM BICARBONATE INJ	PER AMP	1,700.00
VIT A CAP 10,000IU	PER CAP	200.00
VIT BCO INJ.	PER DOSE	600.00
VIT BCO TAB	14 TABS	100.00
VIT C INJ	PER AMP	200.00
VIT C TAB 100MG	14 TABS	100.00
VIT C TAB 500MG	PER TAB	130.00
VIT C TAB 1000MG	PER TAB	180.00
VIT D3 CAP	PER CAP	180.00
VIT E CAP 100 MG	PER CAP	100.00
VIT E CAP 400IU	30 CAPS	12,000.00
VIT E CAP 10001U	PER CAP	300.00
VIT K INJ	PER AMP	300.00
ZINC TAB 20MG	PER TAB	40.00
ZINC CAP 50MG	PER TAB	120.00

SYRUP		
ASTYFER SYR 110ML	PER BOTTLE	4,400.00
ASTYFER SYR 200ML	PER BOTTLE	6,600.00
ASTYMIN G DROPS	PER BOTTLE	3,800.00
ASTYMIN SYR 110ML	PER BOTTLE	4,400.00
ASTYMIN SYR 200ML	PER BOTTLE	6,600.00
CALCIUM SYR	PER BOTTLE	1,200.00
CIKLAVIT SYR	PER BOTTLE	6,000.00
COD LIVER OIL SYR	PER BOTTLE	5,300.00
FOLIC ACID SYR	PER BOTTLE	1,100.00
MIMS DROP	PER BOTTLE	1,200.00
M/VITE DROP	PER BOTTLE	900.00
M/VITE SYR	PER BOTTLE	1,200.00
RECOVER FORTIVA	PER BOTTLE	3,800.00
VIT BCO SYRUP	PER BOTTLE	1,100.00
VIT C SYR	PER BOTTLE	1,200.00
VIT D SYR	PER BOTTLE	4,500.00
EYE, EAR, NOSE AND THROAT		
ARISTOBET-N DROP	PER BOTTLE	1,800.00
AVAMYS NASAL SPRAY	PER PACK	3,800.00
CANDIBIOTIC EAR DROP	PER BOTTLE	4,500.00
CERUMOL EAR DROP	PER BOTTLE	4,200.00
CHLORAMPHENICOL EYE DROP	PER BOTTLE	600.00
CHLORAMPHENICOL EYE OINTMENT	PER TUBE	700.00
CIPROFLOXACIN EYE/EAR DROP	PER BOTTLE	1,100.00
ERYTHROMYCIN EYE OINTMENT	PER TUBE	1,300.00
FLUCONAZOLE EYE/EAR DROP	PER BOTTLE	3,000.00
GENTAMYCIN EYE/EAR DROP	PER BOTTLE	800.00
LOCORTEN VIOFORM EAR DROP	PER BOTTLE	12,000.00
MOUTH WASH	PER BOTTLE	6,800.00
MOXIFLOXACIN EYE DROP	PER BOTTLE	2,300.00
OTOMED EAR DROP	PER BOTTLE	1,600.00
OTRIVIN NASAL DROP (ADULT)	PER BOTTLE	4,500.00
OTRIVIN NASAL DROP (CHILDREN)	PER BOTTLE	4,500.00
SOREPSILS LOZENGES	PER TAB	100.00
SPERSALLERG EYE DROP (ANTALLERGE)	PER BOTTLE	2,500.00
STREPSILS LOZENGES	PER TAB	300.00
TIMOLOL EYE DROP	PER BOTTLE	3,000.00
VISINE EYE DROP	PER BOTTLE	1,800.00
ANTI ALLERGICS AND ANAPHYLACTICS		
ACTIFED SYR	PER BOTTLE	2,300.00
ACTIFED TAB	12 TABS	2,700.00
ADRENALINE INJ	PER AMP	300.00
CETRIZINE SYR (ZYNCET)	PER BOTTLE	3,300.00
CETRIZINE TAB 10MG	PER TAB	140.00
CHLORPHENIRAMINE MALEATE INJ	PER AMP	200.00
CHLORPHENIRAMINE MALEATE SYR	PER BOTTLE	1,000.00

CHLORPHENIRAMINE TAB 4MG (PIRITON)	10 TABS	100.00
DESLOTRADINE TAB 5MG	PER TAB	50.00
DEXAMETHASONE INJ 4MG	PER AMP	200.00
DEXAMETHASONE TAB 0.5MG	PER TAB	10.00
FEXOFENADINE TAB 120MG	20 TABS	10,200.00
FEXOFENADINE TAB 180MG	20 TABS	16,400.00
HYDROCORTISONE INJ 100MG	PER VIAL	900.00
LEVOCETRIZINE TAB 5MG	PER TAB	50.00
LEVOCETRIZINE DROP	PER BOTTLE	2,100.00
LORATIDINE SYR	PER BOTTLE	1,400.00
LORATIDINE TAB 10MG	PER TAB	30.00
PREDNISOLONE TAB 5MG	PER TAB	14.00
ANTI ASTHMATIC AND ANTI TUSSIVES (RESPIRATORY DRUGS)		
AMINOPHYLLINE INJ 250MG	PER AMP	400.00
ASCOREX SYR	PER BOTTLE	1,700.00
COUGH EXPECTORANT (EXIPLON)	PER BOTTLE	800.00
COUGH EXPECTORANT (D-KOFF)	PER BOTTLE	1,600.00
FRANOL TAB	10 TABS	1,000.00
FORTIDE INHALER (BUDENOSIDE+FORMOTEROL)	PER PACK	18,900.00
MONTELUKAST TAB 4MG (MONTIGET)	28 TABS	7,530.00
MONTELUKAST TAB 5MG (MONTIGET)	28 TABS	9,150.00
MONTELUKAST TAB 10MG (MONTIGET)	28 TABS	10,680.00
PULMICORT NEBULES 0.25MG (BUDENOSIDE)	PER AMP	4,300.00
PULMICORT NEBULES 0.5MG	PER AMP	4,500.00
SALBUTAMOL INHALER (VENTOLIN)	PER PACK	9,000.00
SALBUTAMOL INHALER (AEROLINE)	PER PACK	4,500.00
SALBUTAMOL NEBULES 2.5MG	PER AMP	1,000.00
SALBUTAMOL NEBULES 5MG	PER AMP	1,400.00
SALBUTAMOL SYR	PER BOTTLE	900.00
SALBUTAMOL TAB 4MG	PER TAB	20.00
SALTROL INHALER (SALMETEROL+FLUTICASONE)25/125MCG	PER PACK	12,600.00
SALTROL INHALER (SALMETEROL+FLUTICASONE)25/250MCG	PER PACK	14,600.00
SERETIDE INHALER ADULT (SALMETEROL+FLUTICASONE) 50/500MCG	PER PACK	37,500.00
SERETIDE INHALER CHILDREN (SALMETEROL+FLUTICASONE) 25/125MCG	PER PACK	26,300.00
SYMBICORT TURBOHALER 80/4.5MCG	PER PACK	49,500.00
SYMBICORT TURBOHALER 160/4.5MCG	PER PACK	60,400.00
CREAM / OINTMENT / LOTIONS		
ACYCLOVIR CREAM	PER TUBE	5,000.00
ANUSOL CREAM	PER TUBE	7,900.00
ANUSTAT CREAM	PER TUBE	4,200.00
AQUASULF CREAM	PER TUBE	2,100.00
ATHLETE'S FOOT CREAM	PER TUBE	5,300.00
BACTROBAN CREAM	PER TUBE	11,300.00
BENZYL BENZOATE LOTION	PER BOTTLE	1,500.00
BENZYL PEROXIDE CREAM	PER TUBE	5,300.00
BETHADINE LOTION	PER BOTTLE	6,800.00
BETHADINE OINT	PER TUBE	6,000.00

BONJELA OINTMENT	PER TUBE	3,700.00
CALAMINE LOTION	PER BOTTLE	1,400.00
CANESTEN CREAM	PER TUBE	5,300.00
CEREDASE GEL	PER TUBE	4,700.00
CHLORHEXIDINE GEL	PER TUBE	1,200.00
CLINDAMYCIN CREAM	PER TUBE	1,000.00
CLOTRIMAZOLE CREAM	PER TUBE	1,000.00
CLOTRIMAZOLE VAGINAL CREAM	PER TUBE	2,400.00
DAKTACORT CREAM	PER TUBE	8,500.00
DAKTARIN CREAM (MICONAZOLE)	PER TUBE	5,700.00
DEEP RELIEF CREAM	PER TUBE	1,200.00
DRUGELA CREAM	PER TUBE	1,700.00
ELICARTIN POWDER	PER PACK	1,600.00
EURAX CREAM	PER TUBE	6,000.00
FASTUM GEL 50G	PER TUBE	6,800.00
FASTUM GEL 100G	PER TUBE	12,000.00
FUNGUSOL LOTION	PER BOTTLE	1,400.00
GENTAMYCIN CREAM	PER TUBE	1,000.00
GENTIAN VIOLET	PER BOTTLE	1,000.00
GRISEOFULVIN CREAM	PER TUBE	2,700.00
GYNO-DAKTARIN CREAM	PER TUBE	17,500.00
HYDROCORTISONE CREAM	PER TUBE	1,600.00
INTRASITE GEL	PER TUBE	15,000.00
KETOCONAZOLE CREAM	PER TUBE	1,200.00
K-Y JELLY CREAM	PER TUBE	2,000.00
MEBO CREAM	PER TUBE	11,300.00
MEPISAN CREAM	PER TUBE	3,300.00
MUPIROCIN CREAM (MUPIDERM)	PER TUBE	7,000.00
NEO MEDROL LOTION	PER BOTTLE	8,300.00
NEO PENOTRAN FORTE	PER TUBE	7,900.00
NEO PRESOL	PER BOTTLE	4,600.00
NEUROGESIC CREAM	PER TUBE	2,100.00
NEUROGESIC EXTRA CREAM	PER TUBE	4,000.00
NIZORAL CREAM	PER TUBE	9,400.00
OLFEN GEL	PER TUBE	7,200.00
PODOPHYLLIN CREAM	PER TUBE	6,800.00
PROGESTERONE GEL	PER TUBE	10,500.00
SABRESTEN CREAM	PER TUBE	1,600.00
SAVLON LOTION	PER BOTTLE	2,600.00
SILVER SULPHADIAZINE	PER TUBE	1,200.00
SILVER SULPHADIAZINE (DERMAZIN)	PER TUBE	2,700.00
SKINEAL CREAM	PER TUBE	1,800.00
SUDOCREM M/S	PER JAR	9,000.00
SYNALAR CREAM	PER TUBE	9,800.00
TIOCONAZOLE CREAM	PER TUBE	3,200.00
TERBINAFINE CREAM (TABASIL)	PER TUBE	1,700.00
TERBINAFINE CREAM (LAMISIL)	PER TUBE	21,000.00
TRAVOCORT CREAM	PER TUBE	12,000.00
URAH CREAM	PER TUBE	7,000.00
VISITA CREAM	PER TUBE	1,100.00
WHITEFIELD OINTMENT	PER TUBE	1,100.00

WOSAN OINTMENT	PER TUBE		1,900.00
XYLOCAINE CREAM	PER TUBE		2,000.00
YTACAN CREAM	PER TUBE		1,000.00
ZETGEL CREAM	PER TUBE		1,300.00
SURGICALS			
ATROPINE INJ	PER AMP		360.00
BUPIVACAINE INJ (HEAVY)	PER AMP		2,100.00
BUPIVACAINE INJ (PLAIN)	PER AMP		2,100.00
EPHEDRINE INJ	PER AMP		4,500.00
HALOTHANE	PER BOTTLE		31,500.00
ISOFLURANE	PER BOTTLE		46,000.00
KETAMINE INJ	PER VIAL		2,200.00
LIDOCAINE INJ	PER VIAL		1,600.00
PANCURONIUM INJ	PER AMP		3,800.00
PROPOFOL INJ	PER VIAL		4,700.00
STERILE GLOVES	PER PAIR		600.00
SURGICAL BLADE	PER ONE		100.00
SUTURES (CHROMIC)	PER ONE		500.00
SUTURES (NYLON)	PER ONE		300.00
SUTURES (VICRYL)	PER ONE		2,300.00
SUTURES (VICRYL CUTTING)	PER ONE		2,300.00
SUXAMETHONIUM INJ	PER AMP		1,600.00
IVF			
MANNITOL INFUSION	PER PINT		1,700.00
ISOPLASMA INFUSION	PER PINT		2,400.00
OTHER IV FLUID	PER PINT		1,200.00
SOLUSET	PER ONE		2,400.00
OXYGEN			
BIG OXYGEN CYLINDER	PER CYLINDER		80,000.00
OXYGEN VIA EXTRACTOR	PER HOUR /5,000	PER DAY/	80,000.00
SMALL OXYGEN CYLINDER	PER CYLINDER		60,000.00
FEBUXOSTAT TAB 40MG	30 TABS		11,400.00
FEBUXOSTAT TAB 80MG	30 TABS		20,400.00
FENTANYL	PER AMP		3,800.00
LEVOTHYROXINE TAB 50MCG	28 TABS		3,800.00
LEVOTHYROXINE TAB 100MCG	28 TABS		5,500.00
METHOTREXATE	10 TABS		6,750.00
MIST POT CITRATE	PER BOTTLE		2,000.00
ORS	PER SACHET		300.00
ROLITEN 2MG	10 TABS		9,750.00
WATERCARE	PER BOTTLE		800.00
VACCINES			
ACTHIB VACCINE	PER DOSE		22,500.00

ANTI-D INJECTION	PER VIAL	105,000.00
ANTI-TETANUS SERUM 15001U	PER AMP	3,000.00
BCG VACCINE (MULTIDOSE)	PER DOSE	1,500.00
CERVICAL CANCER VACCINE	PER DOSE	28,350.00
CHICKEN POX VACCINE (VARICELLA)	PER DOSE	40,200.00
CHICKEN POX VACCINE (VARIRID)	PER DOSE	29,925.00
CHOLERA VACCINE	PER DOSE	14,925.00
DPT VACCINE	PER DOSE	12,000.00
FLU VACCINE	PER DOSE	18,000.00
HEPATITIS A VACCINE (ADULT)	PER DOSE	24,825.00
HEPATITIS A VACCINE (PAED)	PER DOSE	32,000.00
HEPATITIS B IMMUNOGLOBULIN	PER DOSE	126,750.00
HEPATITIS B VACCINE (MULTI DOSE)	PER DOSE	1,500.00
HEPATITIS B VACCINE (ADULT)	PER DOSE	12,960.00
HEPATITIS B VACCINE (PAED)	PER DOSE	7,500.00
INJECTABLE POLIO VACCINE (IPV MULTIDOSE)	PER DOSE	1,500.00
MEASLES VACCINE (MULTIDOSE)	PER DOSE	1,500.00
MENINGITIS A (MULTIDOSE)	PER DOSE	1,500.00
MENINGITIS (ACYW)	PER DOSE	45,750.00
MEASLES ,MUMPS & RUBELLA (MMR) VACCINE	PER DOSE	21,525.00
ORAL POLIO VACCINE (OPV MULTIDOSE)	PER DOSE	1,500.00
PENTA-HIB VACCINE (MULTIDOSE)	PER DOSE	1,500.00
PNEUMOCOCCAL VACCINE (PCV MULTIDOSE)	PER DOSE	1,500.00
PNEUMOCOCCAL VACCINE	PER DOSE	40,200.00
RABIES VACCINE	PER DOSE	37,875.00
ROTAVIRUS VACCINE (MULTIDOSE)	PER DOSE	1,500.00
ROTAVIRUS VACCINE	PER DOSE	13,725.00
TETANUS & DIPHTHERIA VACCINE (TD MULTIDOSE)	PER DOSE	1,500.00
TETANUS TOXOID	PER DOSE	1,500.00
TWINRIX JNR (HEP A &HEP B)	PER DOSE	16,950.00
TYPHOID VACCINE	PER DOSE	20,000.00
YELLOW FEVER (MULTIDOSE)	PER DOSE	1,500.00
YELLOW FEVER	PER DOSE	20,550.00

