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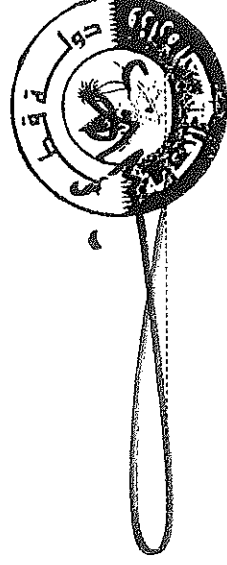
## ترخيص منشأة صحية

## LICENSE FOR MEDICAL INSTITUTION

Institution License No. : 293 رقم ترخيص المنشأة :

| مالك المنشأة            | اسم المنشأة      | نوع المنشأة      | عنوان المنشأة                                                            | الصلاحيه                          | تاريخ الاصدار |
|-------------------------|------------------|------------------|--------------------------------------------------------------------------|-----------------------------------|---------------|
| المجموعة للرعاية الطبية | المستشفى الأهلي  | مستشفى عام       | منطقة : 10 ; وادي السيل / شارع : 232 ; / رقم المبنى                      | من : 2018/04/30 الى : 2019/04/30  | 2018/10/04    |
| Medicare Group          | Al Ahli Hospital | General Hospital | Zone : 10 ; Wadi Al sail / Street : 232 ; Ahmed bin Ali / Building No. : | From : 30/04/2018 To : 30/04/2019 | 04/10/2018    |
| Owner's Name            | Institution Name | Institution Type | Institution Address                                                      | License Validity                  | Issue Date    |

The process of the license renewal must be started at least two months before the expiry of the license.



يجب البدء في إجراءات تجديد الترخيص قبل انتهاء صلاحية الترخيص بشهرين على الأقل

مدير لقطاع الترخيص واعتماد منشآت الرعاية الصحية بالوكالة  
الهيئة الصحية

Acting Director , Healthcare Facilities Licensing &amp; Accreditation Department



(المستشفى الأهلي) (Al Ahli Hospital)

(رقم الترخيص - 293) (License No- 293)

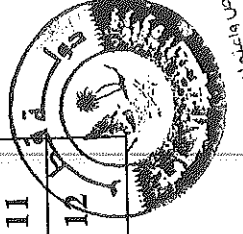
(صلاحية المنشأة 30/04/2019 - 30/04/2018) (License Validity 30/04/2019 - 30/04/2018)

(رقم الشارع: 232 - رقم المنطقة: 10 - رقم المبنى: 0)

(Internal activities of Healthcare Facility / الأنشطة الداخلية للمنشأة الصحية)

(عدد الأسرة: 125) (Bed No. : 125)

| نوع النشاط                     | Scope of service             |
|--------------------------------|------------------------------|
| 1 طب تخدير                     | Anesthesiology               |
| 2 طب أمراض القلب               | Cardiology                   |
| 3 طب أمراض باطنية              | Internal Medicine            |
| 4 طب جراحة الفم والاسنان       | Oral Surgery                 |
| 5 طب جراحة الفم والوجه والفكين | Oral & Maxillofacial Surgery |
| 6 طب تقويم الاسنان             | Orthodontics                 |
| 7 طب أسنان الأطفال             | Pediatric Dentistry          |
| 8 طب تعويضات الأسنان           | Prosthodontics               |
| 9 طب أسنان عام                 | General Dentist              |
| 10 طب جراحة عامة               | General Surgery              |
| 11 طب أطفال                    | Pediatrics                   |
| 12 طب حوادث وطوارئ             | Emergency Medicine           |

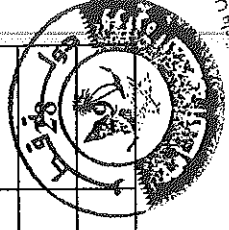


ترخيص واعتماد منشآت  
الرعاية الصحية

د. محمد  
أ. 10.10



|                                    |                                        |    |
|------------------------------------|----------------------------------------|----|
| GP                                 | طب عام                                 | 13 |
| Endocrinology                      | طب الغدد الصماء                        | 14 |
| Otolaryngology                     | طب الأذن والأنف والحنجرة والرأس والعنق | 15 |
| Audio Vestibular Medicine          | طب أمراض السمع والتوازن                | 16 |
| Gastroenterology                   | طب أمراض الجهاز الهضمي                 | 17 |
| Dietician                          | تغذية                                  | 18 |
| Ophthalmology                      | طب وجراحة العيون                       | 19 |
| Orthopedic Surgery                 | طب جراحة عظام                          | 20 |
| Medical Lab                        | مختبر تحاليل طبية                      | 21 |
| Pharmacy                           | صيدلية داخلية                          | 22 |
| Physical Medicine & Rehabilitation | طب طبيعي وتأهيل                        | 23 |
| Pulmonology                        | طب أمراض صدرية                         | 24 |
| Dermatology                        | طب أمراض جلدية                         | 25 |
| Neurosurgery                       | طب جراحة مخ وأعصاب                     | 26 |
| Neurology                          | طب أمراض عصبية                         | 27 |
| Obstetrics & Gynecology            | طب نساء وولادة                         |    |
| Psychiatry                         | طب أمراض نفسية                         |    |



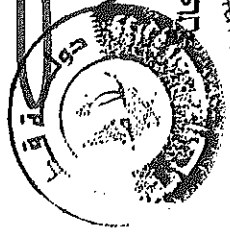
وزارة الصحة  
المملكة العربية السعودية  
5

د. محمد بن  
الحسين  
1441/1442



|                             |                                          |    |
|-----------------------------|------------------------------------------|----|
| X-Ray                       | أشعة تشخيصية                             | 30 |
| Nephrology                  | طب أمراض الكلى                           | 31 |
| Rheumatology                | طب أمراض الروماتيزم                      | 32 |
| Urology                     | طب جراحة المسالك البولية                 | 33 |
| Speech Language Pathologist | طب أمراض النطق                           | 34 |
| Vaccination                 | تطعيمات صحية                             | 35 |
| IVF                         | وحدة المساعدة على الإنجاب والحقن المجهري | 36 |

د. صلاحية  
11/10/2019



مدير إدار ترخيص وإعتماد منشآت الرعاية الصحية بالوكالة  
ترخيص الرعاية الصحية

Acting Director, Healthcare Facilities Licensing & Accreditation Department



**Package Inclusions & Exclusions:**

**Package Inclusions,**

- Room charges (Single Room / Daycare)
- Operation theatre rental / Delivery room care / Cathlab Charges
- Surgeon's Fee/Obstetrician's Fees
- Asst. Surgeon's Fee
- Anesthetist's Fee

**Package Exclusions,**

- Physicians Rounding fees
- Investigations
- Consumables and supplies
- Medications and vaccinations
- Implants
- Pre-operative investigations
- Epidural anesthesia
- Any other items/ services which are not mentioned under "Package Inclusions" above.

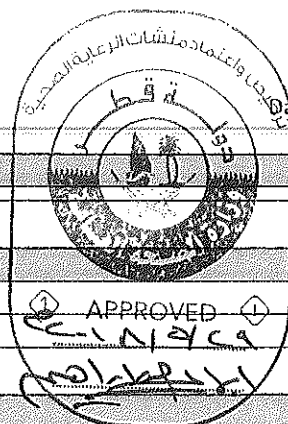


**Notes:**

- If the guest opted for higher class bed category then the differential amount will be charged extra.
- If the Guest stayed more than the package days either due to medical complications or any other reasons, additional stay will be charged extra at standard rates.
- If the Guest stayed less than the package days due to any reason whatsoever, no refund will be made against unutilized room days.
- Delivery packages are related to mother only. In addition to delivery package, normal baby care packages will be charged separately for the baby. Baby care package includes only crib bed charges. Other investigations, services and Physicians rounding fees will be charged extra.
- Red Font: these are additional packages/services for approval.



# AL-AHLI HOSPITAL PRICE LIST



Date: 12-Feb-17

| SR                                    | CODE     | DESCRIPTION                                    | PRICE (QAR) |
|---------------------------------------|----------|------------------------------------------------|-------------|
| <b>ANDROLOGY</b>                      |          |                                                |             |
| <b>Clinical Services / Procedures</b> |          |                                                |             |
| 1                                     | AND00040 | IUI - Intra Uterine Insemination - 1st Session | 3,000.00    |

|                                       |         |                                            |          |
|---------------------------------------|---------|--------------------------------------------|----------|
| <b>ANESTHESIA</b>                     |         |                                            |          |
| <b>Clinical Services / Procedures</b> |         |                                            |          |
| 1                                     | ANS0001 | Anesthesia Fee 1,000                       | 1,000.00 |
| 2                                     | ANS0002 | Anesthesia Fee Dental (2 Hours)            | 1,750.00 |
| 3                                     | ANS0003 | Anesthesia Fee Dental (3 Hours)            | 2,500.00 |
| 4                                     | ANS0004 | Anesthesia Fee Dental (subsequent 15 mins) | 250.00   |
| 5                                     | ANS0011 | Anesthesia Fees-Mini up to 15 Min          | 250.00   |
| 6                                     | ANS0012 | Anesthesia Fees - Minor 15 to 30 Minutes   | 400.00   |
| 7                                     | ANS0013 | Anesthesia Fees- Major from 30 to 60 min   | 750.00   |
| 8                                     | ANS0014 | Anesthesia Fees - MRI                      | 1,500.00 |
| 9                                     | ANS0015 | Anesthesia Fees - I.V cannula insertion    | 300.00   |
| 10                                    | SRV0033 | Epidural Anaesthesia (Inj)                 | 1,320.00 |
| 11                                    | SRV0048 | Local Anesthetic(Large Area)               | 150.00   |
| 12                                    | SRV0049 | Local Anaesthetic (Small Area)             | 90.00    |

|                                       |          |                                                                                                                |           |
|---------------------------------------|----------|----------------------------------------------------------------------------------------------------------------|-----------|
| <b>CARDIOLOGY</b>                     |          |                                                                                                                |           |
| <b>Packages</b>                       |          |                                                                                                                |           |
| 1                                     | PKG01001 | (Card / 01-CCU) Coronary Angiography (For Native)                                                              | 8,050.00  |
| 2                                     | PKG01002 | (Card / 02-CCU) Coronary Angioplasty (For Native) (Excluding stents)                                           | 32,875.00 |
| 3                                     | PKG01003 | (Card / no accomodation) Cardioversion with Tee                                                                | 5,250.00  |
| 4                                     | PKG01004 | (Card / no accomodation) Cardioversion without Tee                                                             | 3,875.00  |
| 5                                     | PKG01005 | (Card / no accomodation) Selective Renal Arteriography                                                         | 4,750.00  |
| 6                                     | PKG01006 | (Card / no accomodation no stents) Renal Angioplasty for one vessel                                            | 13,500.00 |
| 7                                     | PKG01007 | (Card / no accomodation no stents) Renal Angioplasty for two vessels                                           | 23,625.00 |
| 8                                     | PKG01008 | (Card / 01-Day) Posterolateral thoracotomy + Lung resection (lobectomy)                                        | 42,825.00 |
| 9                                     | PKG01009 | (Card / 03-Days) Open Lung / Pleural Biopsy                                                                    | 27,225.00 |
| 10                                    | PKG01010 | (Card / 01-CCU) Coronary Angiography ( For Native + Post CABG Bypass Grafts).                                  | 12,500.00 |
| 11                                    | PKG01011 | (Card / 02-CCU) Coronary Angiography + Coronary Angioplasty (For Native) (Ex. Stents )                         | 41,500.00 |
| 12                                    | PKG01012 | (Card / 02-CCU) Coronary Angiography + Coronary Angioplasty (For Post CABG) (Ex. Stents)                       | 42,500.00 |
| 13                                    | PKG01013 | (Card / 03-CCU) Pacemaker Implantation(Ex. Device)                                                             | 40,000.00 |
| 14                                    | PKG01014 | (Card / 03-CCU) Chamber Implantable Defibrillator Implantation (Ex. Device)                                    | 45,000.00 |
| 15                                    | PKG01015 | (Card / 04-CCU) Cardiac Synchronization Devices with Implantable Defibrillator Implantation(CRTD) (Ex. Device) | 55,000.00 |
| 16                                    | PKG01016 | (Card / 01-CCU) Right Heart Cath (Ex. Catheter)                                                                | 11,500.00 |
| 17                                    | PKG01017 | (Card / 01-CCU) Coronary Angiography+Right Heart Cath(Ex. Catheter)                                            | 17,250.00 |
| 18                                    | PKG01018 | (Card / 01-CCU) Pheripheral Angiography                                                                        | 11,500.00 |
| 19                                    | PKG01019 | (Card / 01-CCU) Loop Recorder Implantation (Ex. Device)                                                        | 12,000.00 |
| <b>Clinical Services / Procedures</b> |          |                                                                                                                |           |
| 1                                     | CAR0001  | Dobutamine Stress Echo (DSE)                                                                                   | 1,750.00  |
| 2                                     | CAR0002  | Transoesophageal Echo (TEE)                                                                                    | 2,000.00  |
| 3                                     | CAR0003  | Portable Echo                                                                                                  | 1,200.00  |
| 4                                     | CAR0004  | 24 Hr Blood pressure (BP)                                                                                      | 1,000.00  |
| 5                                     | CAR0005  | Cardiac Emergency Consultation                                                                                 | 600.00    |
| 6                                     | CAR0007  | Non-Medicated Stent (Each)                                                                                     | 2,800.00  |
| 7                                     | CAR0008  | RENAL STENTS (EACH)                                                                                            | 4,000.00  |
| 8                                     | CAR0009  | Chest tube drain insertion under Local anesthesia                                                              | 3,500.00  |
| 9                                     | CAR0010  | Intra Aortic Balloon Insertion & Pum Connection (Excluding Device)                                             | 2,750.00  |
| 10                                    | CAR0011  | Event Monitor service                                                                                          | 3,500.00  |

Director of Finance  
Al-Ahli Hospital

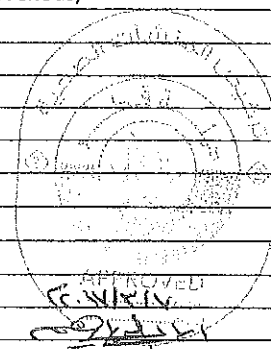


AL-AHLI HOSPITAL

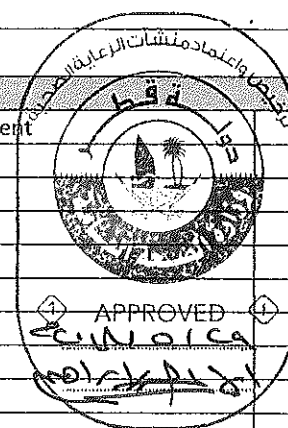
# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE    | DESCRIPTION                                                                                            | PRICE (QAR) |
|----|---------|--------------------------------------------------------------------------------------------------------|-------------|
| 11 | CAR0012 | Pacemaker Interrogation / Programming                                                                  | 1,500.00    |
| 12 | CAR0013 | Pacemaker Interrogation / Programming (Chamber Implantable Defibrillators                              | 2,000.00    |
| 13 | CAR0014 | Pacemaker Interrogation / Programming (Cardiac Synchronization with Implantable Defibrillators - CRTD) | 2,500.00    |
| 14 | CAR0015 | Pericardial Tapping                                                                                    | 3,000.00    |
| 15 | CAR0017 | Coronary Fractional Flow Reserve Cauterization - FFR (Ex. Catheter)- 1 Vessel                          | 6,000.00    |
| 16 | CAR0018 | Coronary Intra-Vascular Ultra Sound - IVUS (Ex. Catheter) - 1 Vessel                                   | 7,000.00    |
| 17 | CAR0019 | Elective Diagnostic Flurscopy (Such as for Mechanical Valves, Pacemaker Wires etc)                     | 2,000.00    |
| 18 | CAR0020 | ECG - Holter for 48 hours                                                                              | 1,750.00    |
| 19 | CAR0021 | Extra Copies of Dignostic or Interventional Procedures                                                 | 100.00      |
| 20 | CAR0022 | Coronary Intra-Vascular Ultra Sound - IVUS (Ex. Catheter) for 2 Vessels                                | 8,500.00    |
| 21 | CAR0023 | Coronary Intra-Vascular Ultra Sound - IVUS (Ex. Catheter) for 3 Vessels                                | 9,500.00    |
| 22 | CAR0024 | Coronary Fractional Flow Reserve Cauterization - FFR (Ex. Catheter)-2 Vessels                          | 7,000.00    |
| 23 | CAR0025 | Coronary Fractional Flow Reserve Cauterization - FFR (Ex. Catheter)- 3 or More Vessels                 | 8,000.00    |
| 24 | CAR0026 | Reviw of Angiogram performed by external provider                                                      | 1,000.00    |
| 25 | CAR0027 | (Card / no accommodation) Carotid Sinus Massage                                                        | 3,500.00    |
| 26 | CAR0028 | (Card / no accommodation) Temporary Cardiac Pacemaker (Transcutaneous)                                 | 5,000.00    |
| 27 | CAR0029 | (Card / no accommodation) Temporary Cardiac Pacemaker (Transvenous)                                    | 7,500.00    |
| 28 | CAR0030 | Pulmonary Hypertension Reversibility Study                                                             | 6,000.00    |
| 29 | CAR0031 | Loop Recorder Interrogation                                                                            | 1,500.00    |
| 30 | CAR0032 | LV-Angiogram                                                                                           | 5,000.00    |
| 31 | CAR0033 | Digital Wrist Ambulatory BP Monitor (24 Hr)                                                            | 1,500.00    |
| 32 | CAR0034 | Service for Expert review of imaging done outside AAH                                                  | 600.00      |
| 33 | SRV0008 | Cardiology Results Review                                                                              | 170.00      |
| 34 | SRV0026 | ECG                                                                                                    | 250.00      |
| 35 | SRV0027 | ECG - Holter for 24 hours                                                                              | 1,100.00    |
| 36 | SRV0028 | ECG -Stress Test                                                                                       | 1,100.00    |
| 37 | SRV0029 | Exercise Stress Echo                                                                                   | 1,650.00    |
| 38 | SRV0030 | Echocardiography                                                                                       | 1,100.00    |



| CARDIOTHORACIC |          |                                                                                 |            |
|----------------|----------|---------------------------------------------------------------------------------|------------|
| Packages       |          |                                                                                 |            |
| 1              | PKG02001 | (THO / 07-Days) Coronary artery bypass Grafting + Aortic valve replacement      | 96,250.00  |
| 2              | PKG02002 | (THO / 07-Days) Coronary artery bypass Grafting (CABG) - on pump                | 84,625.00  |
| 3              | PKG02003 | (THO / 10-Days) Re-do Coronary artery bypass grafting - on pump                 | 97,775.00  |
| 4              | PKG02004 | (THO / 07-Days) Off Pump Coronary artery bypass (OPCAB)                         | 86,875.00  |
| 5              | PKG02005 | (THO / 07-Days) Mitral valve repair                                             | 86,875.00  |
| 6              | PKG02006 | (THO / 07-Days) Mitral valve repair + Tricuspid valve repair                    | 86,875.00  |
| 7              | PKG02007 | (THO / 07-Days) Mitral valve replacement (MVR)                                  | 85,750.00  |
| 8              | PKG02008 | (THO / 07-Days) Mitral valve replacement + Tricuspid valve repair               | 85,750.00  |
| 9              | PKG02009 | (THO / 07-Days) Mitral valve replacement + Tricuspid valve replacement          | 93,250.00  |
| 10             | PKG02010 | (THO / 07-Days) Aortic valve replacement ( AVR)                                 | 85,750.00  |
| 11             | PKG02011 | (THO / 07-Days) Aortic valve replacement + Mitral valve repair                  | 90,750.00  |
| 12             | PKG02012 | (THO / 10-Days) Aortic root (Bentall operation)                                 | 103,150.00 |
| 13             | PKG02013 | (THO / 10-Days) Ascending Aorta replacement                                     | 93,150.00  |
| 14             | PKG02014 | (THO / 10-Days) Bentall operation + Aortic arch replacement                     | 108,150.00 |
| 15             | PKG02015 | (THO / 10-Days) Bentall operation + Hemi arch replacement                       | 95,650.00  |
| 16             | PKG02016 | (THO / 10-Days) Ascending aorta + Hemiarch replacement                          | 95,650.00  |
| 17             | PKG02017 | (THO / 10-Days) Ascending aorta + Aortic arch replacement                       | 98,150.00  |
| 18             | PKG02018 | (THO / 10-Days) Aortic arch + Descending thoracic aorta replacement             | 103,150.00 |
| 19             | PKG02019 | (THO / 07-Days) Double valve replacement ( Mitral + Aortic valve)               | 98,750.00  |
| 20             | PKG02020 | (THO / 07-Days) DB valve replac.( Mitral + Aortic valve)+Tricuspid valve repair | 98,750.00  |



AL-AHLI HOSPITAL  
Cardiac Department

Mustafa El-Ahwal (MBA, FCA, ACCA)  
Director of Finance

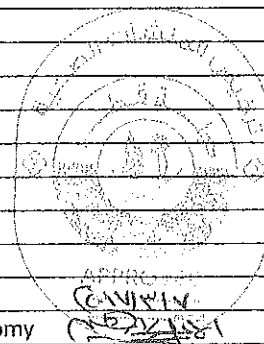
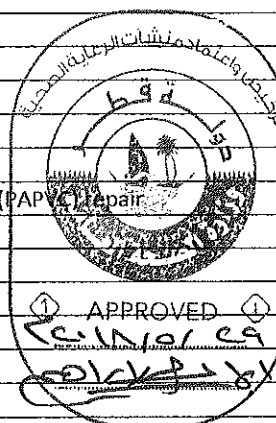


البيانات الطبية  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                                                        | PRICE (QAR) |
|----|----------|------------------------------------------------------------------------------------|-------------|
| 21 | PKG02021 | (THO / 10-Days) DB valve replac. ( Mitral + Aortic valve) + Tricuspid valve repla  | 108,150.00  |
| 22 | PKG02022 | (THO / 07-Days) Coronary artery bypass grafting + Mitral valve repair              | 97,375.00   |
| 23 | PKG02023 | (THO / 07-Days) Coronary artery bypass Grafting + Mitral valve replacement         | 96,250.00   |
| 24 | PKG02024 | (THO / 10-Days) Coronary artery bypass grafting+Ventricular septal defect repair   | 100,650.00  |
| 25 | PKG02025 | (THO / 10-Days) Coronary artery bypass grafting+Left Ventricular aneurysm repair   | 84,900.00   |
| 26 | PKG02026 | (THO / 07-Days) Coronary artery bypass grafting+Aorto-subclavian bypass grafting   | 80,500.00   |
| 27 | PKG02027 | (THO / 07-Days) Coronary artery bypass grafting+Aorto Bi subclavian bypass graft   | 83,000.00   |
| 28 | PKG02028 | (THO / 07-Days) Sternal Dehiscence repair (Re wiring & Secondary suturing)         | 22,125.00   |
| 29 | PKG02029 | (THO / 03-Days) Sternal wound debridement & Secondary suturing                     | 13,525.00   |
| 30 | PKG02030 | (THO / 03-Days) Sternal wire removal & Secondary suturing                          | 12,725.00   |
| 31 | PKG02031 | (THO / 07-Days) Cardiac penetrating wound repair - off pump                        | 58,625.00   |
| 32 | PKG02032 | (THO / 07-Days) Cardiac penetrating wound repair - on pump                         | 69,125.00   |
| 33 | PKG02033 | (THO / 07-Days) Intra-cardiac Foreign body removal - on pump                       | 69,125.00   |
| 34 | PKG02034 | (THO / 07-Days) Atrial septal defect repair                                        | 75,500.00   |
| 35 | PKG02035 | (THO / 07-Days) Ventricular septal defect repair                                   | 78,250.00   |
| 36 | PKG02036 | (THO / 05-Days) Repair of Coarctation of Aorta                                     | 48,300.00   |
| 37 | PKG02037 | (THO / 07-Days) Partial anomalous of pulmonary venous connection (PAPVC) repair    | 78,250.00   |
| 38 | PKG02038 | (THO / 05-Days) PDA ligation via standard thoracotomy approach                     | 42,925.00   |
| 39 | PKG02039 | (THO / 07-Days) Posterolateral thoracotomy + Pneumonectomy                         | 46,125.00   |
| 40 | PKG02040 | (THO / 07-Days) Posterolateral thoracotomy + Lobectomy                             | 46,125.00   |
| 41 | PKG02041 | (THO / 05-Days) Posterolateral thoracotomy + Segmentectomy                         | 42,925.00   |
| 42 | PKG02042 | (THO / 03-Days) Wedge Excision of Lung                                             | 37,225.00   |
| 43 | PKG02043 | (THO / 03-Days) Open Lung & Pleural biopsy                                         | 27,225.00   |
| 44 | PKG02044 | (THO / 07-Days) Posterolateral thoracotomy + Decortication                         | 46,125.00   |
| 45 | PKG02045 | (THO / 05-Days) Posterolateral thoracotomy + Pleural based mass/cyst removal       | 42,925.00   |
| 46 | PKG02046 | (THO / 07-Days) Posterolateral thoracotomy + Lung based mass/cyst removal          | 46,125.00   |
| 47 | PKG02047 | (THO / 05-Days) Pectus repair                                                      | 30,175.00   |
| 48 | PKG02048 | (THO / 03-Days) Rib resection                                                      | 19,475.00   |
| 49 | PKG02049 | (THO / 05-Days) Thoracic wall tumours resection                                    | 27,675.00   |
| 50 | PKG02050 | (THO / 05-Days) Thoracotomy & Pleurectomy                                          | 42,625.00   |
| 51 | PKG02051 | (THO / 07-Days) Median Sternotomy & Mediastinal Tumor Resection                    | 50,025.00   |
| 52 | PKG02052 | (THO / 07-Days) Median Sternotomy, Thymectomy                                      | 44,525.00   |
| 53 | PKG02053 | (THO / 07-Days) Clampshell Thymectomy                                              | 46,025.00   |
| 54 | PKG02054 | (THO / 04-Days) Anterior Pericardiotomy                                            | 25,475.00   |
| 55 | PKG02055 | (THO / 07-Days) Pericardiectomy without Cardiopulmonary Bypass                     | 38,325.00   |
| 56 | PKG02056 | (THO / 07-Days) Pericardiectomy with Cardiopulmonary Bypass                        | 60,375.00   |
| 57 | PKG02057 | (THO / 07-Days) Resection of Vascular Band Through a Thoracotomy                   | 42,025.00   |
| 58 | PKG02058 | (THO / 07-Days) Resection of Vascular Band Through Median Sternotomy               | 51,625.00   |
| 59 | PKG02059 | (THO / 07-Days) Posterolateral Thoracotomy + Repair of Hemidiaphragm               | 51,825.00   |
| 60 | PKG02060 | (THO/ 07 Days) Repair of Abdominal Aortic Aneurysm + Digital Artery Reimplantation | 54,200.00   |
| 61 | PKG02061 | (THO / 07-Days) Coronary Artery Bypass Grafting (CABG) - Off pump                  | 46,650.00   |



| CHIROPRACTIC                   |          |                                                 |           |
|--------------------------------|----------|-------------------------------------------------|-----------|
| Clinical Services / Procedures |          |                                                 |           |
| 1                              | CHRO001  | Chiropractic Comprehensive Examination          | 500.00    |
| 2                              | CHRO002  | Chiropractic treatment (1 session) - 40 minutes | 400.00    |
| 3                              | PKG02062 | (THO / 03-Days) Pleuro Pericardial Window       | 28,000.00 |

| DENTAL                         |          |                                |        |
|--------------------------------|----------|--------------------------------|--------|
| Clinical Services / Procedures |          |                                |        |
| Dental - General               |          |                                |        |
| 1                              | DNT01000 | Comprehensive oral examination | 300.00 |



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

المستشفى الأهلي  
AL-AHLI HOSPITAL

| SR                 | CODE     | DESCRIPTION                                                               | PRICE (QAR) |
|--------------------|----------|---------------------------------------------------------------------------|-------------|
| 2                  | DNT01001 | Consultation - Dental                                                     | 200.00      |
| 3                  | DNT01002 | Letter of referral                                                        | 150.00      |
| 4                  | DNT01003 | Dental Report                                                             | 200.00      |
| 5                  | DNT01004 | Intraoral PA or B/W radiograph-per exposure                               | 100.00      |
| 6                  | DNT01005 | Orthopantomographia - OPG                                                 | 350.00      |
| 7                  | DNT01006 | Dental - Cephalometric Radiograph - Digital                               | 450.00      |
| 8                  | DNT01007 | TMJ X-Ray                                                                 | 350.00      |
| 9                  | DNT01009 | Pulp testing (part of examination)per visit                               | 150.00      |
| 10                 | DNT01010 | Dental Check Follow Up Visit                                              | 100.00      |
| 11                 | DNT01011 | Dental - special arrangements for handicap guests                         | 500.00      |
| 12                 | DNT01012 | Dental - special precautions for infectious disease/disposable equipments | 700.00      |
| 13                 | DNT01013 | Wax - up diagnostic- Model Prostho- Implant                               | 300.00      |
| 14                 | DNT01014 | Orthodontic Diagnostic Photos                                             | 150.00      |
| 15                 | DNT01015 | Orthodontic Diagnostic Records/X-rays- casting Model-Photos/              | 1,300.00    |
| 16                 | DNT02000 | Removal of plaque and /or stain                                           | 500.00      |
| 17                 | DNT02001 | Removal of heavy Calculus & Stain                                         | 800.00      |
| 18                 | DNT02002 | Dental - topical flouride gel application - per jaw                       | 150.00      |
| 19                 | DNT02003 | Top .appl. Of remineralizing agent, one treatment                         | 300.00      |
| 20                 | DNT02004 | Fissure sealing- per tooth                                                | 150.00      |
| 21                 | DNT02005 | Desensitizing procedure- per visit                                        | 50.00       |
| 22                 | DNT02006 | Bleaching , internal- per tooth                                           | 500.00      |
| 23                 | DNT02007 | Bleaching , per jaw                                                       | 1,500.00    |
| 24                 | DNT02008 | Bleaching , full mouth                                                    | 3,000.00    |
| 25                 | DNT02009 | Dental - home bleaching , full mouth                                      | 2,000.00    |
| 26                 | DNT03000 | Provisional ( temporary) restoration                                      | 150.00      |
| 27                 | DNT03001 | Provisional ( intermediate) restoration with Calcium hydroxide            | 300.00      |
| 28                 | DNT03003 | Amalgam restoration - one surface                                         | 350.00      |
| 29                 | DNT03004 | Amalgam restoration- two surfaces                                         | 500.00      |
| 30                 | DNT03005 | Amalgam restoration - three surfaces                                      | 550.00      |
| 31                 | DNT03006 | Amalgam restoration- four surfaces                                        | 550.00      |
| 32                 | DNT03007 | Recontouring of pre existing restorations                                 | 200.00      |
| 33                 | DNT03008 | Dental - dental Jewellery per tooth                                       | 1,000.00    |
| 34                 | DNT03009 | Glass ionomer filling                                                     | 400.00      |
| 35                 | DNT03010 | Dental - glass ionomer filling-permanent tooth                            | 350.00      |
| 36                 | DNT03011 | Dental - glass ionomer filling build up-permanent tooth                   | 500.00      |
| 37                 | DNT03012 | Dental - flowable composite                                               | 200.00      |
| 38                 | DNT03013 | Permanent Composite Filling, Class I                                      | 450.00      |
| 39                 | DNT03014 | Permenant Anterior Composite,class II                                     | 600.00      |
| 40                 | DNT03015 | Permenant Anterior Composite, class III                                   | 450.00      |
| 41                 | DNT03016 | Permenant Anterior Composite, class IV                                    | 600.00      |
| 42                 | DNT03017 | Permenant Composite, class V, class I                                     | 450.00      |
| 43                 | DNT03018 | Permenant MOD Composite Build-up                                          | 700.00      |
| <b>Pedodontics</b> |          |                                                                           |             |
| 1                  | DNT04000 | Pulpotomy                                                                 | 300.00      |
| 2                  | DNT04001 | Pulpectomy Posterior tooth                                                | 750.00      |
| 3                  | DNT04002 | Pulpectomy Anterior tooth                                                 | 500.00      |
| 4                  | DNT05002 | Stainless Steel Crown                                                     | 700.00      |
| <b>Endodontics</b> |          |                                                                           |             |
| 1                  | DNT03002 | Direct pulp capping                                                       | 150.00      |
| 2                  | DNT04003 | Complete prep of root canal- anterior tooth                               | 1,000.00    |
| 3                  | DNT04004 | Complete prep of Root Canal - Premolar tooth                              | 1,500.00    |
| 4                  | DNT04005 | Complete prep of root canal- molar tooth / three canals                   | 2,200.00    |

Mustafa El-Mawal (MBA, FCA, ACCA)  
Director of Finance  
Al-Ahli Hospital

Finance Department



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR                | CODE     | DESCRIPTION                                                                     | PRICE (QAR) |
|-------------------|----------|---------------------------------------------------------------------------------|-------------|
| 5                 | DNT04006 | Complete prep of Root Canal - each Additional canal                             | 600.00      |
| 6                 | DNT04007 | Part of Service-Complete prep of root canal- anterior tooth                     | 50.00       |
| 7                 | DNT04008 | Part of Service-Complete prep of root canal - premolar tooth                    | 50.00       |
| 8                 | DNT04009 | Part of Service-Complete prep of root canal- molar tooth / three canals         | 50.00       |
| 9                 | DNT04010 | Extirpation of pulp or debridement of root canal(s)- emergency                  | 500.00      |
| 10                | DNT04011 | Root canal obturation- each additional canal                                    | 200.00      |
| 11                | DNT04012 | Root canal treatment with Calcium hydroxide                                     | 350.00      |
| 12                | DNT04013 | add I visit for irrigation and /or dressing of root canal system/ per tooth     | 250.00      |
| 13                | DNT04014 | Removing of Fractured Instruments                                               | 2,000.00    |
| 14                | DNT04015 | Removal of a root filling- per canal                                            | 200.00      |
| 15                | DNT04016 | Opening through Artificial Crown (Posterior - Interior)                         | 100.00      |
| 16                | DNT04017 | Endodontic treatment under microscope (Per canal )                              | 500.00      |
| 17                | DNT09033 | Root canal treatment under surgical operating microscope for molar tooth        | 3,550.00    |
| 18                | DNT09034 | Root canal treatment under surgical operating microscope for premolar tooth     | 2,250.00    |
| 19                | DNT09035 | Root canal treatment under surgical operating microscope for extra canal        | 1,100.00    |
| <b>Prosthetic</b> |          |                                                                                 |             |
| 1                 | DNT05000 | Dental - temporary acrylic crown                                                | 150.00      |
| 2                 | DNT05001 | Dental - Temporary Acrylic Crown (LAB SIDE)                                     | 200.00      |
| 3                 | DNT05003 | Myriland Bridge / per tooth                                                     | 1,700.00    |
| 4                 | DNT05004 | Myriland Bridge Acrylic Temporary                                               | 1,000.00    |
| 5                 | DNT05005 | Porcelain Semi-Precious Metal Crown                                             | 2,200.00    |
| 6                 | DNT05006 | Porcelain Precious Metal Crown                                                  | 2,500.00    |
| 7                 | DNT05007 | Part Of Service-Porcelain Precious Metal Crown                                  | 50.00       |
| 8                 | DNT05008 | Ceramic Crown With High Gold                                                    | 3,000.00    |
| 9                 | DNT05009 | Full Crown -Porcelain                                                           | 2,700.00    |
| 10                | DNT05010 | Dental - Zircon Crown / Bridge Per Unit                                         | 4,000.00    |
| 11                | DNT05011 | Dental - Part Of Service- Zircon Crown / Bridge Per Unit                        | 50.00       |
| 12                | DNT05012 | Part Of Service-Full Gold Crown (18 K )                                         | 50.00       |
| 13                | DNT05013 | Part Of Service-Full Metal Crown With Resin                                     | 50.00       |
| 14                | DNT05014 | Part Of Service-Porcelain Labial Veneer (Lab.)                                  | 50.00       |
| 15                | DNT05015 | Part Of Service-Full Crown -Acrylic Resin                                       | 50.00       |
| 16                | DNT05016 | Part Of Service-Myriland Bridge / Per Tooth                                     | 50.00       |
| 17                | DNT05017 | Part Of Service-Full Crown -Porcelain                                           | 50.00       |
| 18                | DNT05018 | Dental - full porcelain ( cerec) crown of anterior                              | 3,500.00    |
| 19                | DNT05019 | Dental - full porcelain ( cerec) crown of posterior                             | 3,700.00    |
| 20                | DNT05020 | Porcelain Crown Repair- Chair Side                                              | 500.00      |
| 21                | DNT05021 | Porcelain Crown Repair - Chair side (complicated)                               | 750.00      |
| 22                | DNT05022 | Removal of Crown                                                                | 200.00      |
| 23                | DNT05023 | Recementing Of Crown                                                            | 300.00      |
| 24                | DNT05024 | Recementing of Crown(Temporary Cement)                                          | 150.00      |
| 25                | DNT05025 | Hemisection including recontouring of tooth and furcation                       | 500.00      |
| 26                | DNT05026 | Telescopic Crown per unit                                                       | 1,800.00    |
| 27                | DNT05027 | Overdenture Partial                                                             | 4,000.00    |
| 28                | DNT05028 | Overdenture complete upper or lower - with attachment - on natural teeth        | 4,000.00    |
| 29                | DNT05029 | Overdenture complete upper or lower - with attachment - on implants             | 6,500.00    |
| 30                | DNT05030 | Overdenture complete upper or lower-with bar and coping crowns-on natural teeth | 4,700.00    |
| 31                | DNT05031 | Overdenture complete upper or lower - with bar and coping crowns - on implants  | 8,000.00    |
| 32                | DNT05032 | Part Of Service-Overdenture Complete                                            | 50.00       |
| 33                | DNT05033 | Part Of Service-Overdenture Partial                                             | 50.00       |
| 34                | DNT05034 | Full Upper Chrome Cobalt Denture                                                | 6,000.00    |
| 35                | DNT05035 | Full Lower Chrome Cobalt Denture                                                | 6,000.00    |
| 36                | DNT05036 | Partial Upper Chrome Cobalt Denture                                             | 4,500.00    |

Musalla El-Ahwal (MBA, PCA, ACCA)

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                                              | PRICE (QAR) |
|----|----------|--------------------------------------------------------------------------|-------------|
| 37 | DNT05037 | Partial Lower Chrome Cobalt Denture                                      | 4,500.00    |
| 38 | DNT05038 | Precision Attachment for Partial Chrome Cobalt Denture                   | 500.00      |
| 39 | DNT05039 | Dentures Immediate Upper                                                 | 2,500.00    |
| 40 | DNT05040 | Dentures Immediate Lower                                                 | 2,500.00    |
| 41 | DNT05041 | Dental - immediate upper denture/partial                                 | 2,000.00    |
| 42 | DNT05042 | Dental - Immediate Lower Denture/Partial                                 | 2,000.00    |
| 43 | DNT05043 | Dental - part of service- immediate upper-partial dentures               | 50.00       |
| 44 | DNT05044 | Dental - part of service- immediate lower-partial dentures               | 50.00       |
| 45 | DNT05045 | Provisional Mini-Denture Resin Base Of 1 - 2 Teeth                       | 600.00      |
| 46 | DNT05046 | Complete upper denture                                                   | 3,200.00    |
| 47 | DNT05047 | Complete lower denture                                                   | 3,400.00    |
| 48 | DNT05048 | Complete upper and lower dentures                                        | 6,500.00    |
| 49 | DNT05049 | partial denture - flexible material                                      | 3,000.00    |
| 50 | DNT05050 | Upper Acrylic Partial Denture                                            | 2,200.00    |
| 51 | DNT05051 | Lower Acrylic Partial Denture                                            | 2,200.00    |
| 52 | DNT05052 | Part Of Service Of Upper Acrylic Partial Denture                         | 50.00       |
| 53 | DNT05053 | Part Of Service Of Lower Acrylic Partial Denture                         | 50.00       |
| 54 | DNT05054 | Partial denture- resin base, 1-3 teeth, insert appliance                 | 900.00      |
| 55 | DNT05055 | Part of Service-Partial denture- resin base, 1-3 teeth, insert appliance | 50.00       |
| 56 | DNT05056 | Adjustment of pre existing denture                                       | 700.00      |
| 57 | DNT05057 | Remodeling - complete denture                                            | 1,000.00    |
| 58 | DNT05058 | Remodeling - partial denture                                             | 600.00      |
| 59 | DNT05059 | Denture base modification                                                | 600.00      |
| 60 | DNT05060 | Relining - complete denture -direct                                      | 600.00      |
| 61 | DNT05061 | Relining - partial denture- direct                                       | 600.00      |
| 62 | DNT05062 | Soft Reliner For Upper Complete Denture                                  | 800.00      |
| 63 | DNT05063 | Soft Reliner For Lower Complete Denture                                  | 800.00      |
| 64 | DNT05064 | Relining - complete denture -indirect                                    | 700.00      |
| 65 | DNT05065 | Relining - partial denture- indirect                                     | 700.00      |
| 66 | DNT05066 | Repairing broken base of a complete denture                              | 500.00      |
| 67 | DNT05067 | Repairing broken base of a partial denture                               | 500.00      |
| 68 | DNT05068 | Denture replication                                                      | 750.00      |
| 69 | DNT05069 | Denture tissue conditioner - therapeutic per appointment                 | 200.00      |
| 70 | DNT05070 | Part of Service-Complete upper denture                                   | 50.00       |
| 71 | DNT05071 | Part of Service-Complete lower denture                                   | 50.00       |
| 72 | DNT05072 | Part of Service-Complete upper and lower dentures                        | 50.00       |
| 73 | DNT05073 | Part of Service-Dentures immediate upper                                 | 50.00       |
| 74 | DNT05074 | Part of Service-DDentures immediate lower                                | 50.00       |
| 75 | DNT05075 | Part of Service-Full upper chrome cobalt denture                         | 50.00       |
| 76 | DNT05076 | Part of Service-Full lower chrome cobalt denture                         | 50.00       |
| 77 | DNT05077 | Part of Service-Partial upper chrome cobalt denture                      | 50.00       |
| 78 | DNT05078 | Part of Service-Partial lower chrome cobalt denture                      | 50.00       |
| 79 | DNT05079 | Composite Veneer per tooth                                               | 1,100.00    |
| 80 | DNT05080 | Dental - Porcelain Labial Veneer (Cerec)                                 | 3,500.00    |
| 81 | DNT05081 | Porcelain Labial Veneer (LAB.)                                           | 2,500.00    |
| 82 | DNT05082 | Recementing Of Porcelain Veneer                                          | 500.00      |
| 83 | DNT05083 | Gold Inlay one surface                                                   | 2,000.00    |
| 84 | DNT05084 | Gold Inlay two surfaces                                                  | 2,200.00    |
| 85 | DNT05085 | Gold Inlay Three surfaces                                                | 2,500.00    |
| 86 | DNT05086 | Inlay Porcelain/Ceramic one surface                                      | 1,600.00    |
| 87 | DNT05087 | Inlay Porcelain/Ceramic Two Surfaces                                     | 1,800.00    |
| 88 | DNT05088 | Inlay Porcelain/Ceramic three surfaces                                   | 2,000.00    |

Mustafa El-Ahwal (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital





# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR                  | CODE     | DESCRIPTION                                                    | PRICE (QAR) |
|---------------------|----------|----------------------------------------------------------------|-------------|
| 89                  | DNT05089 | Dental - porcelain inlay one surface- cerec                    | 2,500.00    |
| 90                  | DNT05090 | Dental - porcelain inlay two surfaces- cerec                   | 2,500.00    |
| 91                  | DNT05091 | Dental - porcelain inlay three surfaces- cerec                 | 3,000.00    |
| 92                  | DNT05092 | Onlay Porcelain/Ceramic two surfaces                           | 2,200.00    |
| 93                  | DNT05093 | Onlay Porcelain/Ceramic three surfaces                         | 2,500.00    |
| 94                  | DNT05094 | Dental - porcelain onlay two surfaces- cerec                   | 3,000.00    |
| 95                  | DNT05095 | Dental - porcelain onlay three surfaces- cerec                 | 3,000.00    |
| 96                  | DNT05096 | Recementing of inlay/ onlay / per tooth                        | 250.00      |
| 97                  | DNT05097 | Part Of Service-Gold Inlay One Surface                         | 50.00       |
| 98                  | DNT05098 | Part Of Service-Gold Inlay Two Surfaces                        | 50.00       |
| 99                  | DNT05099 | Part Of Service-Gold Inlay Three Surfaces                      | 50.00       |
| 100                 | DNT05100 | Part Of Service-Inlay Porcelain/Ceramic One Surface            | 50.00       |
| 101                 | DNT05101 | Part Of Service-Inlay Porcelain/Ceramic Two Surfaces           | 50.00       |
| 102                 | DNT05102 | Part Of Service-Inlay Porcelain/Ceramic Three Surfaces         | 50.00       |
| 103                 | DNT05103 | Part Of Service-Onlay Porcelain/Ceramic Two Surfaces           | 50.00       |
| 104                 | DNT05104 | Part Of Service-Onlay Porcelain/Ceramic Three Surfaces         | 50.00       |
| 105                 | DNT05105 | Casted Post & Core Building Up High Gold                       | 1,400.00    |
| 106                 | DNT05106 | Casted Post & Core Building Up Zircon                          | 1,600.00    |
| 107                 | DNT05107 | Casted Post & Core Building Up Precious Metal                  | 1,200.00    |
| 108                 | DNT05108 | Fiber Glass post&core -simple                                  | 700.00      |
| 109                 | DNT05109 | Fiber Glass post&core - complicated                            | 800.00      |
| 110                 | DNT05110 | Post screw & core building up of Anterior                      | 550.00      |
| 111                 | DNT05111 | Post screw & core building up of Posterior                     | 750.00      |
| 112                 | DNT05112 | Retention Pin                                                  | 100.00      |
| 113                 | DNT05113 | Post+Core Build Up                                             | 1,000.00    |
| <b>Orthodontics</b> |          |                                                                |             |
| 1                   | DNT01008 | Dental - diagnostic casting model                              | 350.00      |
| 2                   | DNT05114 | Amalgam build up with Metal band                               | 600.00      |
| 3                   | DNT05115 | Post and core for crown                                        | 550.00      |
| 4                   | DNT08000 | Amalgam restoration- deciduous posterior tooth                 | 200.00      |
| 5                   | DNT08001 | Adhesive resin restoration- deciduous tooth                    | 200.00      |
| 6                   | DNT08003 | Space Maintainer / Tooth                                       | 800.00      |
| 7                   | DNT08004 | Full Arch Space Maintainer                                     | 1,500.00    |
| 8                   | DNT09000 | Orthodontic Cleaning Kit                                       | 100.00      |
| 9                   | DNT09001 | Preventive Ortho Treatment Down Payment                        | 2,000.00    |
| 10                  | DNT09002 | Expansion Orthodontic Appliance                                | 2,000.00    |
| 11                  | DNT09003 | Functional Orthodontic Appliance- Removable Or Fixed           | 2,000.00    |
| 12                  | DNT09004 | Control Oral Habit Appliance                                   | 1,500.00    |
| 13                  | DNT09005 | Repairing Removable Orthodontic Appliance                      | 500.00      |
| 14                  | DNT09006 | Pre- Prosthodontic Ortho Tx. Simple                            | 2,500.00    |
| 15                  | DNT09007 | Pre- Prosthodontic Ortho Tx. Moderate                          | 5,000.00    |
| 16                  | DNT09008 | Pre- Prosthodontic Ortho Tx. Complicated                       | 7,000.00    |
| 17                  | DNT09009 | Bracketing Of Metal Bracket For One Jaw                        | 2,500.00    |
| 18                  | DNT09010 | Bracketing Of Metal Bracket For Two Jaws                       | 5,000.00    |
| 19                  | DNT09011 | Bracketing Of Ceramic Bracket For One Jaw                      | 3,000.00    |
| 20                  | DNT09012 | Bracketing Of Ceramic Bracket For Two Jaws                     | 6,000.00    |
| 21                  | DNT09013 | Bracketing Of SI ( Self Ligating) Ceramic Bracket For One Jaw  | 3,500.00    |
| 22                  | DNT09014 | Bracketing Of SI ( Self Ligating) Ceramic Bracket For Two Jaws | 7,000.00    |
| 23                  | DNT09015 | Bracketing Of Lingual Brackets - Invisalign One Jaw            | 10,000.00   |
| 24                  | DNT09016 | Bracketing Of Lingual Brackets - Invisalign Two Jaws           | 15,000.00   |
| 25                  | DNT09017 | Tad - Temporary Anchorage Device                               | 500.00      |
| 26                  | DNT09018 | Part Of Orthodontic Treatment                                  | 500.00      |

Mustafa El-Ahwal (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital



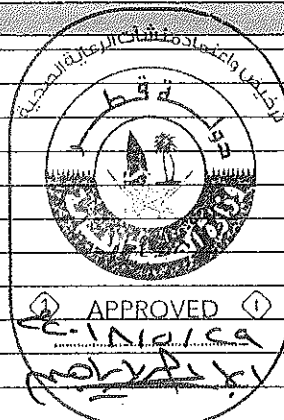


المستشفى الاحلي  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                       | PRICE (QAR) |
|----|----------|---------------------------------------------------|-------------|
| 27 | DNT09019 | Part Of Orthodontic Treatment                     | 1,000.00    |
| 28 | DNT09020 | Follow Up Orthodontic Treatment                   | 200.00      |
| 29 | DNT09021 | Rebonding Of Brackets                             | 200.00      |
| 30 | DNT09022 | Orthodontic Retainers Per Jaw                     | 1,000.00    |
| 31 | DNT09023 | Rebonding Fixed Retainer                          | 500.00      |
| 32 | DNT09024 | Recontouring Of Tooth                             | 200.00      |
| 33 | DNT09025 | Debonding Per Jaw                                 | 750.00      |
| 34 | DNT09026 | Tmj Appliance ( Repositioning, Splint)            | 2,000.00    |
| 35 | DNT09027 | Follow Up Tmj Treatment With Appliance Adjustment | 500.00      |
| 36 | DNT09028 | Follow Up Tmj Treatment                           | 200.00      |



| Oral & Facio-Maxillary Surgery |          |                                                                                   |           |
|--------------------------------|----------|-----------------------------------------------------------------------------------|-----------|
| Packages                       |          |                                                                                   |           |
| 1                              | PKG11001 | (DNT / 01 Day) Facial Skin Lesion Excision (With Anesthesia)                      | 5,625.00  |
| 2                              | PKG11002 | (DNT / D Case) Tmj Arthrocentesis                                                 | 5,075.00  |
| 3                              | PKG11003 | (DNT / 01 Day) Tmj Arthroscopy                                                    | 9,850.00  |
| 4                              | PKG11004 | (DNT / 02 Days) Tmj Meniscoplasty                                                 | 17,050.00 |
| 5                              | PKG11005 | (DNT / 04 Days) Tmj Ankylosis Without Fossa And Condyle Implant                   | 30,050.00 |
| 6                              | PKG11006 | (DNT / 02 Days) Duct Relocation                                                   | 9,400.00  |
| 7                              | PKG11007 | (DNT / 01 Day) Bone Cyst Large More Than 1 Tooth Area But Smaller Than 3 Teeth Ar | 11,300.00 |
| 8                              | PKG11008 | (DNT / 01 Day) Bone Cyst Bigger Than 3 Teeth                                      | 11,400.00 |
| 9                              | PKG11009 | (DNT / 04 Days) Harvest Of Iliac Crest                                            | 9,950.00  |
| 10                             | PKG11010 | (DNT / 01 Day) Harvest Of Cartilage Conchal Bowel                                 | 4,700.00  |
| 11                             | PKG11011 | (DNT / 03 Days) Harvest Of Calvarium                                              | 9,250.00  |
| 12                             | PKG11012 | (DNT / 03 Days) Harvest Of Rib                                                    | 9,850.00  |
| 13                             | PKG11013 | (DNT / 01 Day) Fractured Mandible Closed                                          | 13,150.00 |
| 14                             | PKG11014 | (DNT / 02 Days) Fractured Mandible Open                                           | 16,650.00 |
| 15                             | PKG11015 | (DNT / 03 Days) Fractured Maxilla                                                 | 16,500.00 |
| 16                             | PKG11016 | (DNT / 02 Days) Fractured Zygoma Open One Site                                    | 14,650.00 |
| 17                             | PKG11017 | (DNT / 02 Days) Fractured Zygoma Open Two Sites                                   | 10,775.00 |
| 18                             | PKG11018 | (DNT / D Case) Fractured Zygoma Closed                                            | 6,975.00  |
| 19                             | PKG11019 | (DNT / D Case) Fractured Nose Closed And Splint                                   | 11,100.00 |
| 20                             | PKG11020 | (DNT / 03 Days) Fractured Nasoethmoids Or Nasal Open                              | 18,500.00 |
| 21                             | PKG11021 | (DNT / 02 Days) Fractured Orbital Floor With Implant                              | 18,650.00 |
| 22                             | PKG11022 | (DNT / 03 Days) Orbital Walls (More Than One) With Implant                        | 24,500.00 |
| 23                             | PKG11023 | (DNT / 09 Days) Fractured Orbital Roof With Neurosurgery                          | 41,450.00 |
| 24                             | PKG11024 | (DNT / 06 Days) Fractured Panfacial                                               | 43,450.00 |
| 25                             | PKG11025 | (DNT / 01 Day) Removal Of More Than One Plate                                     | 11,300.00 |
| 26                             | PKG11026 | (DNT / 01 Day) Large Tissue Laceration More Than 15 Cm                            | 11,500.00 |
| 27                             | PKG11027 | (DNT / 03 Days) Abscess Drainage Extraoral                                        | 10,600.00 |
| 28                             | PKG11028 | (DNT / 02 Days) Skin Cancer Excision                                              | 10,900.00 |
| 29                             | PKG11029 | (DNT / 02 Days) Skin Flap                                                         | 11,150.00 |
| 30                             | PKG11030 | (DNT / 02 Days) Split Thickness Skin Graft                                        | 5,550.00  |
| 31                             | PKG11031 | (DNT / 02 Days) Full Thickness Skin Graft                                         | 5,550.00  |
| 32                             | PKG11032 | (DNT / 01 Day) Otoplasty                                                          | 11,600.00 |
| 33                             | PKG11033 | (DNT / 01 Day) Submental Liposuction                                              | 8,600.00  |
| 34                             | PKG11034 | (DNT / 02 Days) Platysmaplasty                                                    | 14,550.00 |
| 35                             | PKG11035 | (DNT / Ip Other) Tracheostomy                                                     | 3,700.00  |
| 36                             | PKG11036 | (DNT / 02 Days) Cervical Nodes                                                    | 8,025.00  |
| 37                             | PKG11037 | (DNT / 02 Days) Haemangioma Large Laser                                           | 7,400.00  |
| 38                             | PKG11038 | (DNT / 03 Days) Bilateral Sagittal Split Osteotomy                                | 20,850.00 |
| 39                             | PKG11039 | (DNT / 03 Days) LeFort I Osteotomy                                                | 20,850.00 |



المستشفى الاحلي  
AL-AHLI HOSPITAL

Finance Department

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR                             | CODE     | DESCRIPTION                                                                      | PRICE (QAR) |
|--------------------------------|----------|----------------------------------------------------------------------------------|-------------|
| 40                             | PKG11040 | (DNT / 05 Days) Bimaxillary Osteotomy                                            | 35,650.00   |
| 41                             | PKG11041 | (DNT / 01 Day) Genioplasty                                                       | 8,900.00    |
| 42                             | PKG11042 | (DNT / 04 Days) Zygomatic Osteotomy                                              | 24,950.00   |
| 43                             | PKG11043 | (DNT / 02 Days) Rhinoplasty Open Without Grafts                                  | 17,050.00   |
| 44                             | PKG11044 | (DNT / 02 Days) Augmentation Rhinoplasty With Medpor Implant                     | 15,150.00   |
| 45                             | PKG11045 | (DNT / 02 Days) Facial Implants ( Without Price Of Implant Itself)               | 14,550.00   |
| 46                             | PKG11046 | (DNT / 05 Days) Alveolar Cleft Repair Abbeholm                                   | 35,500.00   |
| 47                             | PKG11047 | Harvesting and inset of bone grafts (multiple)                                   | 20,000.00   |
| Clinical Services / Procedures |          |                                                                                  |             |
| 1                              | DNT06000 | Extraction Of Lower Wisdom Tooth                                                 | 700.00      |
| 2                              | DNT06001 | Sectional removal of a tooth                                                     | 600.00      |
| 3                              | DNT06002 | Removal of Remaining Root                                                        | 450.00      |
| 4                              | DNT06003 | Removal of additional tooth or part(s) thereof                                   | 350.00      |
| 5                              | DNT06004 | Surg removal of tooth/fragment requiring both removal of bone and tooth division | 3,500.00    |
| 6                              | DNT06005 | Splinting of displaced tooth/ teeth                                              | 1,500.00    |
| 7                              | DNT06006 | Replantation and splinting of tooth                                              | 1,500.00    |
| 8                              | DNT06007 | Frenectomy                                                                       | 2,000.00    |
| 9                              | DNT06008 | Drainage of abscess or cyst                                                      | 1,500.00    |
| 10                             | DNT06009 | Drainage of abcessor cyst /each additional visit                                 | 3,500.00    |
| 11                             | DNT06010 | Crown Lengthening (Surgically)                                                   | 1,000.00    |
| 12                             | DNT06011 | Tooth Transplantation (Including Rct)                                            | 4,500.00    |
| 13                             | DNT06012 | Anterior Apicectomy                                                              | 2,000.00    |
| 14                             | DNT06013 | Posterior Apicectomy Lower                                                       | 3,500.00    |
| 15                             | DNT06014 | Posterior Apicectomy Upper                                                       | 4,500.00    |
| 16                             | DNT06015 | Exposure Of Tooth Simple                                                         | 1,000.00    |
| 17                             | DNT06016 | Exposure Of Tooth Complicated                                                    | 2,500.00    |
| 18                             | DNT06017 | Excision Of Exostosis- Oral                                                      | 4,500.00    |
| 19                             | DNT06018 | Excision Of Oral Lesion Biopsy-                                                  | 2,000.00    |
| 20                             | DNT06019 | Bone Grafts Per Operation Site With 0.5G                                         | 1,000.00    |
| 21                             | DNT06020 | Bone Grafts Per Operation Site With 1G                                           | 1,300.00    |
| 22                             | DNT06021 | Bone Grafts Per Operation Site With 2G                                           | 2,000.00    |
| 23                             | DNT06022 | Bone Grafts Membrane Gtr                                                         | 1,500.00    |
| 24                             | DNT06023 | Bone Grafts intraoral Allograft / With Bone Scraber                              | 2,000.00    |
| 25                             | DNT06024 | Antarl Surgery, Immediate Closure Of Antrum                                      | 1,500.00    |
| 26                             | DNT06025 | Oro- Antral Fistula, Delayed Recovery, Closure                                   | 4,500.00    |
| 27                             | DNT06026 | Internal Sinus- Lift ( Indirect Inferior Approach) Per Tooth                     | 1,800.00    |
| 28                             | DNT06027 | Harvesting Of Intraoral Tissue For Grafting, Mucosa                              | 1,200.00    |
| 29                             | DNT06028 | Post Surgical Treatment, Alveolitis                                              | 400.00      |
| 30                             | DNT06029 | Surgical Excision, Tumor Benign, Scar 1Cm                                        | 1,000.00    |
| 31                             | DNT06030 | Surgical Excision, Tumor Benign, Scar More Than 1Cm                              | 2,000.00    |
| 32                             | DNT06031 | Cyst, Granuloma Excision Under 1 Cm                                              | 1,000.00    |
| 33                             | DNT06032 | Cyst, Marsupialization                                                           | 2,000.00    |
| 34                             | DNT06033 | Surgical Incision And Drainage, Extra Oral Abscess                               | 2,000.00    |
| 35                             | DNT06034 | Intraoral Sequestrectomy By Infection Or Osteomyelitis                           | 3,000.00    |
| 36                             | DNT06035 | Excision Of Mucocele Or Ranula                                                   | 2,500.00    |
| 37                             | DNT06036 | Laser In Addition With Periodontitis, Periimplantitis Per Quadrant               | 300.00      |
| 38                             | DNT06037 | Laser Gingival contouring per tooth                                              | 250.00      |
| 39                             | DNT06038 | Laser Gingivectomy per quad                                                      | 1,500.00    |
| 40                             | DNT06039 | Laser Gingivectomy per tooth                                                     | 250.00      |
| 41                             | DNT06040 | Dental laser Bleaching                                                           | 4,000.00    |
| 42                             | DNT06041 | Root canal treatment with laser per canal                                        | 350.00      |
| 43                             | DNT06042 | Wound Treatment with Laser                                                       | 250.00      |

Mustafa El-Ahwi (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

المستشفى الأهلي  
AL-AHLI HOSPITAL

| SR | CODE     | DESCRIPTION                                                                       | PRICE (QAR) |
|----|----------|-----------------------------------------------------------------------------------|-------------|
| 44 | DNT06043 | periimplantitis Treatment with Laser                                              | 250.00      |
| 45 | DNT06044 | Laser supporting Treatment by apsectoectomy                                       | 300.00      |
| 46 | DNT06045 | Laser Troughing per tooth                                                         | 250.00      |
| 47 | DNT06046 | Implant Insertion Aesthetic (Including Abutment)                                  | 7,000.00    |
| 48 | DNT06047 | Implant Insertion Complicated (Including Abutment)                                | 6,000.00    |
| 49 | DNT06048 | Implant Insertion Standard (Including Abutment)                                   | 5,000.00    |
| 50 | DNT06049 | Abutment- Zirconium/ Casted (As Separate)                                         | 2,000.00    |
| 51 | DNT06050 | Abutment- Titanium (As Separate)                                                  | 1,300.00    |
| 52 | DNT06051 | Surgical Re- Entry And Placement Of Healing Transmucosal Element Per Implant      | 1,000.00    |
| 53 | DNT06052 | Removal Of Provisional Implant                                                    | 200.00      |
| 54 | DNT06053 | Removal Of Implant Loose                                                          | 600.00      |
| 55 | DNT06054 | Removal Of Implant- Complicated                                                   | 2,000.00    |
| 56 | DNT06055 | Screwing Attachment To Connect Implant To Natural Tooth                           | 3,000.00    |
| 57 | DNT06056 | Installation Of Provisional Implant                                               | 600.00      |
| 58 | DNT06057 | Surgical Guide For Implant                                                        | 500.00      |
| 59 | DNT06058 | Amputation 1 Or 2 Roots - With Recontouring                                       | 1,500.00    |
| 60 | DNT07000 | Periodontal Status Examination                                                    | 300.00      |
| 61 | DNT07001 | Curettage / Per Quadrant                                                          | 300.00      |
| 62 | DNT07002 | Root Planning And Subgingival Curettage- Per Eight Teeth Or Less                  | 2,000.00    |
| 63 | DNT07003 | Gingivectomy                                                                      | 2,500.00    |
| 64 | DNT07004 | Periodontal Surgery Per Site (Flap Approach With Osteoplasty Or Peri-Implantitis) | 2,500.00    |
| 65 | DNT07005 | Dental - Gingivoplasty                                                            | 2,500.00    |
| 66 | DNT07006 | Crown Lengthening / Per Tooth                                                     | 250.00      |
| 67 | DNT07007 | periodontal splint - per joint                                                    | 300.00      |
| 68 | DNT07008 | periodontal reevaluation                                                          | 200.00      |
| 69 | DNT07009 | Periodontal Splint Per Joint                                                      | 300.00      |
| 70 | DNT07010 | Periodontal follow up and Reevaluation                                            | 200.00      |
| 71 | DNT07011 | Perio Abscess, Scaling, Curettage, Surgery or Medication                          | 300.00      |
| 72 | DNT08002 | Extraction Of Deciduous Tooth                                                     | 200.00      |
| 73 | DNT09029 | Night Guard                                                                       | 800.00      |
| 74 | DNT09030 | Hard Bite-raising appliance                                                       | 1,500.00    |
| 75 | DNT09031 | TMJ soft appliance (Aqua splint)                                                  | 1,000.00    |
| 76 | DNT09032 | Sport shield appliance-per jaw                                                    | 1,000.00    |
| 77 | DEN20001 | Removal of calculus-each additional visit                                         | 150.00      |
| 78 | DNT06059 | Dental - extraction of anterior tooth - complicated                               | 500.00      |
| 79 | DNT06060 | Dental - extraction of posterior tooth - complicated                              | 600.00      |
| 80 | DNT06061 | Dental - extraction of upper wisdom tooth - complicated                           | 800.00      |
| 81 | DNT06062 | Dental - extraction of lower wisdom tooth/complicated                             | 1,200.00    |
| 82 | DNT06063 | Dental - extraction of lower wisdom tooth (malposed)                              | 2,500.00    |
| 83 | DNT06064 | Dental - SURGICAL DRESSING                                                        | 150.00      |
| 84 | DNT06065 | Dental - add. visit for irrigation and /or dressing post-extraction               | 200.00      |
| 85 | DNT06066 | Dental - intraoral biopsy                                                         | 500.00      |
| 86 | DNT06067 | Dental - re-implantation of avulsed teeth                                         | 500.00      |
| 87 | DNT06068 | Dental - removal of tori and exostoses                                            | 1,500.00    |
| 88 | DNT06069 | Dental - extraction of deciduous tooth- complicated                               | 350.00      |
| 89 | DNT06070 | Extraction Of Anterior Tooth                                                      | 300.00      |
| 90 | DNT06071 | Extraction Of Posterior Tooth                                                     | 450.00      |
| 91 | DNT06072 | Extraction Of Upper Wisdom Tooth                                                  | 600.00      |
| 92 | DNT06073 | Extraction Of Wisdom Tooth (Malposed)                                             | 1,500.00    |
| 93 | DNT06074 | Removing Of Fractured Instruments                                                 | 2,000.00    |
| 94 | DNT09036 | Harvest and inset of jaw bone cotical                                             | 5,000.00    |
| 95 | DNT09037 | Harvest of cancellous bone                                                        | 3,000.00    |

Director of Finance  
Al-Ahli Hospital

Finance Department



AL-AHLI HOSPITAL  
PRICE LIST

Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                           | PRICE (QAR) |
|----|----------|---------------------------------------|-------------|
| 96 | DNT09039 | Low Level Laser Therapy (Per Session) | 750.00      |

| DERMATOLOGY                                          |         |                                                                  |          |
|------------------------------------------------------|---------|------------------------------------------------------------------|----------|
| Clinical Services / Procedures SERVICES / PROCEDURES |         |                                                                  |          |
| 1                                                    | DRM0001 | EL.W From 1 to 2 - each                                          | 500.00   |
| 2                                                    | DRM0002 | EL.W From 3 to 5 - each                                          | 300.00   |
| 3                                                    | DRM0003 | EL.W From 6 & up - each                                          | 250.00   |
| 4                                                    | DRM0004 | S.T. from 1 to 2 - each                                          | 200.00   |
| 5                                                    | DRM0005 | S.T. from 3 to 5 - each                                          | 150.00   |
| 6                                                    | DRM0006 | S.T. from 6 & up - each                                          | 100.00   |
| 7                                                    | DRM0007 | SEB.K. from 1 to 2 - each                                        | 500.00   |
| 8                                                    | DRM0008 | SEB.K. from 3 to 5 - each                                        | 300.00   |
| 9                                                    | DRM0009 | SEB.K. from 6 & up - each                                        | 150.00   |
| 10                                                   | DRM0010 | W. Face from 1 to 8 - each                                       | 100.00   |
| 11                                                   | DRM0011 | W. Face from 9 & up - each                                       | 75.00    |
| 12                                                   | DRM0012 | CRYO Warts from 1 to 3 - each                                    | 100.00   |
| 13                                                   | DRM0013 | S.Boipsy Small piece < 1cm                                       | 800.00   |
| 14                                                   | DRM0014 | S.Boipsy Large piece > 1cm                                       | 1,000.00 |
| 15                                                   | DRM0015 | EXC. PR. Epidermal Cyst < 1cm                                    | 1,300.00 |
| 16                                                   | DRM0016 | EXC. PR. Epidermal Cyst > 1cm                                    | 1,500.00 |
| 17                                                   | DRM0017 | EXC. PR. Naevus < 1cm                                            | 1,200.00 |
| 18                                                   | DRM0018 | EXC. PR. Naevus > 1cm                                            | 1,500.00 |
| 19                                                   | DRM0019 | EXC. PR. Seborrheic Keratosis < 1cm                              | 800.00   |
| 20                                                   | DRM0020 | EXC. PR. Seborrheic Keratosis > 1cm                              | 900.00   |
| 21                                                   | DRM0021 | INC. PR. Abscess up to 2 cm                                      | 500.00   |
| 22                                                   | DRM0022 | INT. INJ. Area up to 3 cm cross - each                           | 300.00   |
| 23                                                   | DRM0023 | INT. INJ. Area > 3 to 5cm - each                                 | 500.00   |
| 24                                                   | DRM0024 | Sclerotherapy - Reticular Veins (Face)                           | 500.00   |
| 25                                                   | DRM0025 | Sclerotherapy - Reticular Veins (Leg)                            | 1,000.00 |
| 26                                                   | DRM0026 | EC - Ambulatory Phlebotomy - Each                                | 3,500.00 |
| 27                                                   | DRM0027 | CH. PEEL. Face per session                                       | 500.00   |
| 28                                                   | DRM0028 | CH. PEEL. Neck per session                                       | 500.00   |
| 29                                                   | DRM0029 | CH. PEEL. Back of the Hands per session                          | 500.00   |
| 30                                                   | DRM0030 | BOTOX Palmar Hyperhidrosis                                       | 2,500.00 |
| 31                                                   | DRM0031 | BOTOX Axillary Hyperhidrosis                                     | 2,200.00 |
| 32                                                   | DRM0032 | BOTOX Facial Wrinkles Full                                       | 2,000.00 |
| 33                                                   | DRM0033 | BOTOX Facial Wrinkles One Area                                   | 1,500.00 |
| 34                                                   | DRM0034 | EXC. With Margins : Up To 3 Mm                                   | 1,500.00 |
| 35                                                   | DRM0035 | EXC. With Margins : > 3 To 4 Mm                                  | 2,000.00 |
| 36                                                   | DRM0036 | Laser Hair Removal - Upper Lips - (Per Session)                  | 300.00   |
| 37                                                   | DRM0037 | Laser Hair Removal - Chin - (Per Session)                        | 300.00   |
| 38                                                   | DRM0038 | Laser Hair Removal - Cheeks - (Per Session)                      | 500.00   |
| 39                                                   | DRM0039 | Laser Hair Removal - Face Package - (Per Session)                | 600.00   |
| 40                                                   | DRM0040 | Laser Hair Removal - Forehead - (Per Session)                    | 400.00   |
| 41                                                   | DRM0041 | Laser Hair Removal - Nose - (Per Session)                        | 200.00   |
| 42                                                   | DRM0042 | Laser Hair Removal - Eye Brows - (Per Session)                   | 500.00   |
| 43                                                   | DRM0043 | Laser Hair Removal - Forehead/ Eye Brows Package - (Per Session) | 800.00   |
| 44                                                   | DRM0044 | Laser Hair Removal - Ears - (Per Session)                        | 300.00   |
| 45                                                   | DRM0045 | Laser Hair Removal - Axilla - (Per Session)                      | 400.00   |
| 46                                                   | DRM0046 | Laser Hair Removal - Neck - (Per Session)                        | 500.00   |
| 47                                                   | DRM0047 | Laser Hair Removal - Forearms - (Per Session)                    | 800.00   |
| 48                                                   | DRM0048 | Laser Hair Removal - Arms - (Per Session)                        | 800.00   |

Mustafa El Agha (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

العيادة العامة  
AL-AHLI HOSPITAL

| SR | CODE    | DESCRIPTION                                                                                 | PRICE (QAR) |
|----|---------|---------------------------------------------------------------------------------------------|-------------|
| 49 | DRM0049 | Laser Hair Removal - Forearm / Arm Package - (Per Session)                                  | 1,500.00    |
| 50 | DRM0050 | Laser Hair Removal - Hands or Feet - (Per Session)                                          | 200.00      |
| 51 | DRM0051 | Laser Hair Removal - Thighs - (Per Session)                                                 | 3,000.00    |
| 52 | DRM0052 | Laser Hair Removal - Legs - (Per Session)                                                   | 2,000.00    |
| 53 | DRM0053 | Laser Hair Removal - Thighs/ Legs Package - (Per Session)                                   | 4,000.00    |
| 54 | DRM0054 | Laser Hair Removal - Chest - (Per Session)                                                  | 1,000.00    |
| 55 | DRM0055 | Laser Hair Removal - Abdomen - (Per Session)                                                | 1,000.00    |
| 56 | DRM0056 | Laser Hair Removal - Back All- (Per Session)                                                | 2,000.00    |
| 57 | DRM0057 | Laser Hair Removal - Bikini Line - (Per Session)                                            | 1,000.00    |
| 58 | DRM0058 | Laser Hair Removal - Buttocks - (Per Session)                                               | 1,500.00    |
| 59 | DRM0059 | Laser Hair Removal - Face for Men - (Per Session)                                           | 800.00      |
| 60 | DRM0060 | Laser Hair Removal - Beard Line - (Per Session)                                             | 900.00      |
| 61 | DRM0061 | Laser Hair Removal - Behind the Neck - (Per Session)                                        | 400.00      |
| 62 | DRM0062 | Laser Hair Removal - Test - (Per Session)                                                   | 300.00      |
| 63 | DRM0063 | Laser Hair Removal - Back Upper - (Per Session)                                             | 2,500.00    |
| 64 | DRM0064 | NAIL Surgery- Ingrown nail                                                                  | 2,000.00    |
| 65 | DRM0065 | CO2 Laser Sur- For add. 5mm(Per Session)                                                    | 500.00      |
| 66 | DRM0066 | VX Laser Diameter UP TO 5mm(Per Session)                                                    | 600.00      |
| 67 | DRM0067 | VX Laser Diameter >5mm to 1cm(Per Session)                                                  | 700.00      |
| 68 | DRM0068 | VX Laser Diameter >1cm to 1.5cm(Per Session)                                                | 800.00      |
| 69 | DRM0069 | VX Laser Diameter >1.5cm to 2cm(Per Session)                                                | 900.00      |
| 70 | DRM0070 | VX Laser Diameter >2cm to 3cm(Per Session)                                                  | 1,000.00    |
| 71 | DRM0071 | VX Laser Diameter >3cm to 4cm(Per Session)                                                  | 1,100.00    |
| 72 | DRM0072 | VX Laser Diameter >4cm to 5cm(Per Session)                                                  | 1,200.00    |
| 73 | DRM0073 | VX Laser Scars up to 2cm(Per Session)                                                       | 600.00      |
| 74 | DRM0074 | VX Laser Scars >2cm to 3cm(Per Session)                                                     | 700.00      |
| 75 | DRM0075 | VX Laser Scars >3cm to 4cm(Per Session)                                                     | 800.00      |
| 76 | DRM0076 | VX Laser Scars >4cm to 5cm(Per Session)                                                     | 900.00      |
| 77 | DRM0077 | VX Laser Scars add. cm(Per Session)                                                         | 50.00       |
| 78 | DRM0078 | PIG Laser Diameter up to 2cm(Per Session)                                                   | 500.00      |
| 79 | DRM0079 | PIG Laser Diameter >2cm to 3cm(Per Session)                                                 | 800.00      |
| 80 | DRM0080 | PIG Laser Diameter >3cm to 4cm(Per Session)                                                 | 900.00      |
| 81 | DRM0081 | PIG Laser Diameter >4cm to 5cm(Per Session)                                                 | 1,000.00    |
| 82 | DRM0082 | PIG Laser Diameter >5cm to 6cm(Per Session)                                                 | 1,100.00    |
| 83 | DRM0083 | PIG Laser Diameter >6cm to 7cm(Per Session)                                                 | 1,200.00    |
| 84 | DRM0084 | PIG Laser Diameter >7cm to 8cm(Per Session)                                                 | 1,300.00    |
| 85 | DRM0085 | PIG Laser Diameter >8cm to 9cm(Per Session)                                                 | 1,400.00    |
| 86 | DRM0086 | Intralesional Injection of Plasma One area Face/Scalp (Excluding Price of Tube/Consumables) | 1,000.00    |
| 87 | DRM0087 | Derma Roller Scar ++ (Excluding Roler Charge)                                               | 1,200.00    |
| 88 | DRM0088 | Derma Stamp (Excluding Stamp Charge)                                                        | 800.00      |
| 89 | DRM0089 | Filler (Excluding Filler Charge)                                                            | 1,200.00    |
| 90 | DRM0090 | Mesotherapy (Excluding Masotherapy Consumable Charge)                                       | 1,200.00    |
| 91 | DRM0091 | Allergic Skin Patch Testing (Excluding Patch Charges)                                       | 1,000.00    |

| EMERGENCY                      |         |                           |          |
|--------------------------------|---------|---------------------------|----------|
| Clinical Services / Procedures |         |                           |          |
| 1                              | EMG0001 | Dressing Burn Large       | 600.00   |
| 2                              | EMG0002 | Dressing Burn Medium      | 360.00   |
| 3                              | EMG0003 | Dressing Burn Small       | 240.00   |
| 4                              | EMG0004 | Injection Insulin         | 30.00    |
| 5                              | EMG0005 | Cardiac Arrest Ress.(CPR) | 1,200.00 |
| 6                              | EMG0006 | Cast Removal              | 100.00   |

Musaid El-Ahwal (MBA, PCA, ACCA)

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE    | DESCRIPTION                                    | PRICE (QAR) |
|----|---------|------------------------------------------------|-------------|
| 7  | EMG0007 | Cold Sponging                                  | 60.00       |
| 8  | EMG0008 | Eye Wash                                       | 120.00      |
| 9  | EMG0009 | Gastric Lavage Complicated                     | 900.00      |
| 10 | EMG0010 | Gastric Lavage Simple                          | 600.00      |
| 11 | EMG0011 | Irrigation Of Indwelling Cath                  | 120.00      |
| 12 | EMG0012 | Manipulisation Of Small Bones                  | 360.00      |
| 13 | EMG0013 | Masuplilaz./Under Analgesia                    | 600.00      |
| 14 | EMG0014 | Nasal Packing                                  | 180.00      |
| 15 | EMG0015 | Zadik's Procedure                              | 600.00      |
| 16 | EMG0016 | Aspiration Of Fluid                            | 60.00       |
| 17 | EMG0017 | Pleural Fluid P.Centthesis                     | 120.00      |
| 18 | EMG0018 | Incision Drain SML Abscess LA                  | 320.00      |
| 19 | EMG0019 | Venous Cut Down                                | 420.00      |
| 20 | EMG0020 | Removal Of Foreign Body U/LA                   | 1,250.00    |
| 21 | EMG0021 | Administration Of I/V Fluids                   | 175.00      |
| 22 | EMG0022 | Part of a Service                              | 70.00       |
| 23 | EMG0023 | Consultation Fee                               | 380.00      |
| 24 | EMG0024 | Plaster of Paris (P.O.P)                       | 250.00      |
| 25 | EMG0025 | Tube grip                                      | 100.00      |
| 26 | EMG0026 | Crepe bandage                                  | 40.00       |
| 27 | EMG0027 | Removal of foreign body ?superficial? under LA | 630.00      |
| 28 | EMG0028 | Cardio-detect                                  | 190.00      |
| 29 | EMG0029 | Minor Surgery - LA                             | 2,000.00    |
| 30 | EMG0030 | Suturing of wounds - LA                        | 1,200.00    |
| 31 | EMG0031 | Full Cast Removal                              | 780.00      |
| 32 | EMG0032 | MRSA Dressing                                  | 300.00      |
| 33 | EMG0033 | Removal of Impacted Earring                    | 300.00      |
| 34 | EMG0034 | Excision of Ingrowing Toe Nail                 | 600.00      |
| 35 | EMG0035 | Echocardiograph                                | 1,100.00    |
| 36 | EMG0036 | Foley Catheter                                 | 350.00      |
| 37 | EMG0037 | Management of Wounds Without Suturing          | 1,000.00    |

## ENT

### Packages

|    |          |                                                                                 |           |
|----|----------|---------------------------------------------------------------------------------|-----------|
| 1  | PKG04001 | (ENT / 01-Day) Adenoidectomy                                                    | 8,100.00  |
| 2  | PKG04002 | (ENT / 01-Day) 30130 Excision of Inferior Turbinates/Turbinoplasty              | 8,850.00  |
| 3  | PKG04003 | (ENT / 01-Day) 30520 Septoplasty/ SMR Nasal Septum                              | 9,850.00  |
| 4  | PKG04004 | (ENT / 01-Day) 30560 Endoscopic Lysis Intranasal Synechae                       | 7,300.00  |
| 5  | PKG04005 | (ENT / 01-Day) 30410 Rhinoplasty                                                | 16,500.00 |
| 6  | PKG04006 | (ENT / 01-Day) 30420 Rhinoplasty with Septal Repair                             | 18,500.00 |
| 7  | PKG04007 | (ENT / 01-Day) 30430 Rhinoplasty Secondary, Minor Revision                      | 11,400.00 |
| 8  | PKG04008 | (ENT / 01-Day) 30903 Control Nasal Hemorrhage, Anterior                         | 7,300.00  |
| 9  | PKG04009 | (ENT / 01-Day) 30905 Control Nasal Hemorrhage, Posterior                        | 12,400.00 |
| 10 | PKG04010 | (ENT / 01-Day) 31255 Nasal/Sinus Endoscopy/Ethmoidectomy                        | 11,900.00 |
| 11 | PKG04011 | (ENT / 01-Day) 31256 Nasal/Sinus Endoscopy/Maxillary Antrostomy                 | 11,900.00 |
| 12 | PKG04012 | (ENT / 01-Day) 31276 Nasal/Sinus Endoscopy/Frontal Sinus Exploration            | 11,900.00 |
| 13 | PKG04013 | (ENT / 01-Day) 31287 Nasal/Sinus Endoscopy/Sphenoidectomy                       | 11,900.00 |
| 14 | PKG04014 | (ENT / 01-Day) 31237 Nasal/Sinus Endoscopy/with Polypectomy                     | 11,400.00 |
| 15 | PKG04015 | (ENT / 01-Day) 31240 Nasal/Sinus Endoscopy/with Concha Bullosa Resection        | 8,850.00  |
| 16 | PKG04016 | (ENT / 01-Day) 31299 Unlisted Proc. Sinuses: FESS (Funct. Endoscopic Sinus Surg | 20,300.00 |
| 17 | PKG04017 | (ENT / 01-Day) 31535 Direct Laryngoscopy, with Biopsy                           | 7,300.00  |
| 18 | PKG04018 | (ENT / 01-Day) 31530 Direct Laryngoscopy, with Foreign Body Removal             | 7,800.00  |

Musab El-Ahwal (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital



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AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                                               | PRICE (QAR) |
|----|----------|---------------------------------------------------------------------------|-------------|
| 19 | PKG04019 | (ENT / 01-Day) 31525 Laryngoscopy/Tracheoscopy                            | 7,300.00    |
| 20 | PKG04020 | (ENT / 01-Day) 31545 Micro Laryngoscopy/Removal Vocal Cord Lesion         | 10,850.00   |
| 21 | PKG04021 | (ENT / 01-Day) 69205 Removal Foreign Body Ear, G.A.                       | 7,300.00    |
| 22 | PKG04022 | (ENT / 01-Day) 69421 Myringotomy/with or without Grommet/one or two sides | 7,800.00    |
| 23 | PKG04023 | (ENT / 01-Day) 69502 Mastoidectomy                                        | 16,500.00   |
| 24 | PKG04024 | (ENT / 01-Day) 69620 Myringoplasty                                        | 14,950.00   |
| 25 | PKG04025 | (ENT / 01-Day) 69633 Tympanoplasty + Ossicular Reconstruction             | 17,500.00   |
| 26 | PKG04026 | (ENT / 01-Day) 69641 Tympanoplasty + Mastoidectomy                        | 21,800.00   |
| 27 | PKG04027 | (ENT / 01-Day) 69660 Stapedectomy                                         | 14,950.00   |
| 28 | PKG04028 | (ENT / 01-Day) 42140 Uvulectomy/ Uvulo-palatoplasty                       | 9,350.00    |
| 29 | PKG04029 | (ENT / 01-Day) 42145 Palato-pharyngoplasty                                | 11,900.00   |
| 30 | PKG04030 | (ENT / 01-Day) 42820 Tonsillectomy and Adenoidectomy, under age 12        | 9,850.00    |
| 31 | PKG04031 | (ENT / 01-Day) 42821 Tonsillectomy and Adenoidectomy, over age 12         | 12,400.00   |
| 32 | PKG04032 | (ENT / 01-Day) 42825 Tonsillectomy under age 12                           | 8,300.00    |
| 33 | PKG04033 | (ENT / 01-Day) 42826 Tonsillectomy over age 12                            | 10,350.00   |
| 34 | PKG04034 | (ENT / 01-Day) 42830 Adenoidectomy under age 12                           | 7,300.00    |
| 35 | PKG04035 | (ENT / 01-Day) 42831 Adenoidectomy over age 12                            | 8,300.00    |
| 36 | PKG04036 | (ENT / 01-Day) 10060 Incision and Drainage Abscess, Simple                | 7,300.00    |
| 37 | PKG04037 | (ENT / 01-Day) 10061 Incision and Drainage Abscess, Complicated           | 11,400.00   |
| 38 | PKG04038 | (ENT / 01-Day) 11421 Excision Lesion <1cm                                 | 8,850.00    |
| 39 | PKG04039 | (ENT / 01-Day) 11422 Excision Lesion >1cm                                 | 11,400.00   |
| 40 | PKG04040 | (ENT / 01-Day) 11621 Excision Malignant Lesion <1cm                       | 11,400.00   |
| 41 | PKG04041 | (ENT / 01-Day) 11622 Excision Malignant Lesion >1cm                       | 13,950.00   |
| 42 | PKG04042 | (ENT / 01-Day) 12011 Repair of Laceration, simple                         | 7,300.00    |
| 43 | PKG04043 | (ENT / 01-Day) 13132 Repair of Laceration, complex                        | 11,400.00   |
| 44 | PKG04044 | (ENT / 01-Day) 31239 Nasal/Sinus Endoscopy/with Dacryocystorhinostomy     | 13,400.00   |
| 45 | PKG04045 | (ENT / 01-Day) Open Reduction Nasal Fracture                              | 12,400.00   |
| 46 | PKG04046 | (ENT / 01-Day) Closed Reduction Nasal Fracture                            | 8,300.00    |
| 47 | PKG04047 | (ENT / 02 Days) Control of Post Tonsilleectomy Bleeding Under GA          | 11,405.00   |
| 48 | PKG04048 | (ENT / 01-Day) Evacuation of Septal Hematoma                              | 7,600.00    |
| 49 | PKG04049 | (ENT / 01-Day) Removal of Grommet Tube under GA                           | 6,050.00    |
| 50 | PKG04050 | (ENT / 03-Days) Endoscopic Repair of Neonatal Choanal Atresia             | 20,300.00   |
| 51 | PKG04051 | (ENT / 01-Day) Repair of Choanal Atresia                                  | 13,600.00   |
| 52 | PKG04052 | (ENT / 01-Day) Removal of Nasal Pack                                      | 3,962.50    |
| 53 | PKG04053 | (ENT / 01-Day) Cochlear Implant(Excluding Device)                         | 27,000.00   |

## Clinical Services / Procedures

|    |         |                                                              |          |
|----|---------|--------------------------------------------------------------|----------|
| 1  | AUD0001 | Hearing Screening Audiometry Test (PTA)                      | 200.00   |
| 2  | AUD0002 | Hearing Diagnostic Audiometry Test (PTA)                     | 300.00   |
| 3  | AUD0003 | Children Free-Field Audiometry Test                          | 250.00   |
| 4  | AUD0004 | Adult Free-Field Audiometry Test                             | 250.00   |
| 5  | AUD0005 | Speech Audiometry                                            | 300.00   |
| 6  | AUD0006 | Tympanometry + Acoustic Reflex (Middle Ear Pressure)         | 250.00   |
| 7  | AUD0007 | Tympanometry + Eustachian Tube Function                      | 250.00   |
| 8  | AUD0008 | Acoustic Reflex                                              | 150.00   |
| 9  | AUD0009 | Acoustic Reflex Decay                                        | 150.00   |
| 10 | AUD0010 | Tone Decay Test                                              | 200.00   |
| 11 | AUD0011 | Audiological Assessment                                      | 500.00   |
| 12 | AUD0012 | Follow-Up Audiological Assessment                            | 250.00   |
| 13 | AUD0013 | Auditory Brain Stem Response (ABR)                           | 900.00   |
| 14 | AUD0014 | Auditory Brain Stem Response (ABR) + Audiological Assessment | 1,200.00 |
| 15 | AUD0015 | Auditory Brain Stem Response under General Anesthesia        | 5,000.00 |
| 16 | AUD0016 | Echo-G Evoked Potential                                      | 400.00   |

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# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE    | DESCRIPTION                                        | PRICE (QAR) |
|----|---------|----------------------------------------------------|-------------|
| 17 | AUD0017 | Vestibular Evoked Myogenic Potential (VEMP)        | 400.00      |
| 18 | AUD0018 | Otoacoustic Emissions (OAE)                        | 250.00      |
| 19 | AUD0019 | Newborn Hearing Screening                          | 300.00      |
| 20 | AUD0020 | Videonystagmography                                | 500.00      |
| 21 | AUD0021 | Caloric Test (Air)                                 | 300.00      |
| 22 | AUD0022 | Vertigo Work-Up                                    | 1,200.00    |
| 23 | AUD0023 | Vestibular Office Test                             | 300.00      |
| 24 | AUD0024 | Canalith Repositioning Maneuver (CRM)              | 350.00      |
| 25 | AUD0025 | Vestibular Rehabilitation Therapy                  | 250.00      |
| 26 | AUD0026 | Fitting of Hearing Deficit                         | 300.00      |
| 27 | AUD0027 | Tuning of Cochlear Implant                         | 700.00      |
| 28 | AUD0028 | Ear Mold - one side (right or left)                | 200.00      |
| 29 | AUD0029 | Ear Mold - both sides (right and left)             | 400.00      |
| 30 | AUD0031 | Tinnitus Treatment (per session)                   | 300.00      |
| 31 | AUD0034 | Maintenance for Hearing Aid for Atlas + ITE        | 420.00      |
| 32 | AUD0035 | Hearing Aid FM System                              | 700.00      |
| 33 | AUD0036 | Ear Band                                           | 140.00      |
| 34 | AUD0037 | Hearing Aid Maintenance                            | 50.00       |
| 35 | ENT0001 | Tympanogram                                        | 250.00      |
| 36 | ENT0002 | Audiogram                                          | 300.00      |
| 37 | ENT0003 | Ear Wash /Cleaning - one side                      | 150.00      |
| 38 | ENT0004 | Ear Wash /Cleaning - two sides                     | 250.00      |
| 39 | ENT0005 | Ear Pack/Ototoxic                                  | 150.00      |
| 40 | ENT0006 | Myringotomy - one side                             | 2,000.00    |
| 41 | ENT0007 | Myringotomy - two sides                            | 3,000.00    |
| 42 | ENT0008 | Nasal Endoscopy                                    | 400.00      |
| 43 | ENT0009 | Direct Laryngoscopy                                | 400.00      |
| 44 | ENT0010 | Flexible Endoscopy - upper airway                  | 600.00      |
| 45 | ENT0011 | Control Nasal Bleeding - cauterization             | 400.00      |
| 46 | ENT0012 | Control Nasal Bleeding - anterior pack             | 500.00      |
| 47 | ENT0013 | Control Nasal Bleeding - posterior pack            | 1,000.00    |
| 48 | ENT0014 | Stroboscopy                                        | 700.00      |
| 49 | ENT0015 | Somnoplasty Turbinates                             | 4,500.00    |
| 50 | ENT0016 | Somnoplasty Palate                                 | 5,000.00    |
| 51 | ENT0017 | Somnoplasty Turbinates + Palate                    | 6,000.00    |
| 52 | ENT0018 | Somnoplasty Tonsils                                | 5,000.00    |
| 53 | ENT0019 | Somnoplasty Turbinates + Palate +Uvuloplasty       | 7,000.00    |
| 54 | ENT0020 | Somnoplasty Palate +Uvuloplasty                    | 6,000.00    |
| 55 | ENT0021 | Uvuloplasty/Uvullectomy                            | 2,500.00    |
| 56 | ENT0022 | Foreign Body Removal Ear/Nose/Throat               | 350.00      |
| 57 | ENT0023 | Endoscopic Removal of Foreign Body - Throat        | 800.00      |
| 58 | ENT0024 | Endoscopic Division of Nasal Synechiae             | 3,000.00    |
| 59 | ENT0025 | Endoscopic Nasal Polypectomy                       | 3,500.00    |
| 60 | ENT0026 | Drainage of Abscess/Hematoma                       | 1,000.00    |
| 61 | ENT0027 | Excision of Head/Neck/Face Lesion                  | 2,000.00    |
| 62 | ENT0028 | Excision of Head/Neck/Face Lesion + Reconstruction | 3,000.00    |
| 63 | ENT0029 | Scar Revision                                      | 2,000.00    |
| 64 | ENT0030 | Biopsy of Head/Neck/ Face Lesion                   | 1,000.00    |
| 65 | ENT0031 | Scarring Skin Tag                                  | 1,000.00    |
| 66 | ENT0032 | Suturing of Head/Neck/Face Laceration - minor      | 1,500.00    |
| 67 | ENT0033 | Suturing of Head/Neck/Face Laceration - major      | 2,000.00    |
| 68 | ENT0034 | Antral Wash-out - one side                         | 700.00      |

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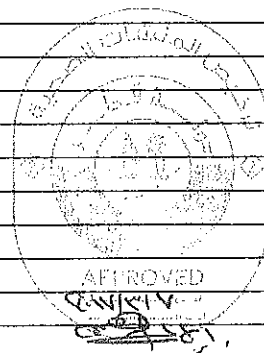
AL-AHLI HOSPITAL  
PRICE LIST

Date: 12-Feb-17

| SR | CODE    | DESCRIPTION                      | PRICE (QAR) |
|----|---------|----------------------------------|-------------|
| 69 | ENT0035 | Antral Wash-out - two sides      | 1,000.00    |
| 70 | ENT0036 | Dressing                         | 150.00      |
| 71 | ENT0037 | Removal of Sutures               | 100.00      |
| 72 | ENT0038 | Injection Fee                    | 50.00       |
| 73 | ENT0039 | Grommet Tube Removal - one side  | 350.00      |
| 74 | ENT0040 | Grommet Tube Removal - two sides | 500.00      |
| 75 | ENT0041 | 30130 Turbinectomy               | 3,000.00    |
| 76 | MAG0001 | ENT Procedures                   | 300.00      |
| 77 | MAG0002 | Audiology Exam (Hearing Test)    | 300.00      |
| 78 | SRV0003 | Audiometry                       | 60.00       |
| 79 | SRV0040 | Hearing Screen                   | 170.00      |
| 80 | SRV0072 | Services for Hearing Aids        | 50.00       |
| 81 | SRV0078 | Tympanometry                     | 60.00       |



| GASTROENTEROLOGY               |         |                                                       |           |
|--------------------------------|---------|-------------------------------------------------------|-----------|
| Clinical Services / Procedures |         |                                                       |           |
| 1                              | GST0001 | Flexible Sigmoidoscopy                                | 2,000.00  |
| 2                              | GST0002 | Full Colonoscopy                                      | 4,000.00  |
| 3                              | GST0003 | Colonoscopy + Polypectomy                             | 6,400.00  |
| 4                              | GST0004 | OGD + Helicobacter Pyloric Test                       | 3,000.00  |
| 5                              | GST0005 | OGD + Oesophageal Sclerotherapy                       | 5,500.00  |
| 6                              | GST0006 | OGD + Oesophageal Varices Band Ligation               | 6,000.00  |
| 7                              | GST0007 | OGD + Electrocautery of Bleeding Point (Heater Probe) | 5,000.00  |
| 8                              | GST0008 | OGD + Dilatation of Benign Stricture                  | 5,000.00  |
| 9                              | GST0009 | OGD + Dilatation of Malignant Stricture               | 5,000.00  |
| 10                             | GST0010 | OGD + Polypectomy                                     | 6,400.00  |
| 11                             | GST0011 | OGD + Removal of Foreign Body                         | 5,000.00  |
| 12                             | GST0012 | PEG Tube Insertion                                    | 8,000.00  |
| 13                             | GST0013 | PEG Tube Removal                                      | 4,000.00  |
| 14                             | GST0014 | PEG Tube Re-Insertion                                 | 8,000.00  |
| 15                             | GST0015 | ERCP + Diagnostic                                     | 10,000.00 |
| 16                             | GST0016 | ERCP + Polypectomy + Stone Extraction                 | 15,000.00 |
| 17                             | GST0017 | ERCP + Stent Removal                                  | 5,000.00  |
| 18                             | GST0018 | Paracentesis                                          | 2,000.00  |
| 19                             | GST0019 | Flexible Sigmoidoscopy + Band Ligation of Hemorrhoids | 4,000.00  |
| 20                             | GST0021 | Small Bowel Capsule Endoscopy                         | 6,600.00  |
| 21                             | GST0022 | Colon Capsule Endoscopy                               | 8,300.00  |
| 22                             | GST0023 | Polypectomy                                           | 3,000.00  |
| 23                             | GST0024 | Flexible Sigmoidoscopy + Polypectomy                  | 4,400.00  |
| 24                             | GST0025 | Colonoscopy + Sclerotherapy + Polypectomy             | 7,000.00  |
| 25                             | GST0026 | Colonoscopy + Stricture Balloon Dilation              | 6,000.00  |
| 26                             | GST0027 | Colonoscopy + Stenting                                | 12,000.00 |
| 27                             | GST0028 | OGD + Savary Dilation of Stricture                    | 5,500.00  |
| 28                             | GST0029 | OGD + Dilation + Stenting                             | 10,000.00 |
| 29                             | GST0030 | OGD + Glue of Gastric Varices                         | 7,000.00  |
| 30                             | GST0031 | OGD + Band Ligation of Gastric Varices                | 8,000.00  |
| 31                             | GST0032 | OGD + Achalasia Ballon Dilatation                     | 8,000.00  |
| 32                             | GST0033 | ERCP + Sphincterotomy                                 | 12,000.00 |
| 33                             | GST0034 | ERCP + Sphincterotomy + Plastic Stenting              | 15,000.00 |
| 34                             | GST0035 | ERCP + Sphincterotomy + Metallic Stenting             | 16,000.00 |
| 35                             | GST0036 | ERCP + Removal of Stent + New Stent                   | 17,000.00 |
| 36                             | GST0037 | ERCP + Sphincterotomy + Stent (2)                     | 16,000.00 |



المستشفى الأهلي  
AL-AHLI HOSPITAL  
Clinical Department

Mustafa El-Ahwal (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital



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AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST



Date: 12-Feb-17

| SR | CODE    | DESCRIPTION                                | PRICE (QAR) |
|----|---------|--------------------------------------------|-------------|
| 37 | GST0038 | Remicade (Infliximab) injection            | 2,000.00    |
| 38 | GST0039 | Esophageal Manometry                       | 4,000.00    |
| 39 | GST0040 | Anorectal Manometry                        | 4,000.00    |
| 40 | GST0041 | 24-Hr-PH Monitoring                        | 4,000.00    |
| 41 | GST0042 | Argon Plasma Coagulation(APC) for Bleeding | 2,000.00    |

| IVF                            |            |                                                                                                                   |           |
|--------------------------------|------------|-------------------------------------------------------------------------------------------------------------------|-----------|
| Packages                       |            |                                                                                                                   |           |
| 1                              | PKG13000   | (IVF/ D Case) Transvaginal Egg Retrieval                                                                          | 13,400.00 |
| 2                              | PKG13000/1 | (IVF/ D Case) Transvaginal Egg Retrieval-2nd Attempt                                                              | 10,720.00 |
| 3                              | PKG13000/2 | (IVF/ D Case) Transvaginal Egg Retrieval-3rd Attempt                                                              | 8,710.00  |
| 4                              | PKG13001   | (IVF/D Case) Embryo Transfer(Fresh/Frozen)                                                                        | 5,100.00  |
| 5                              | PKG13001/1 | (IVF/D Case) Embryo Transfer(Fresh/Frozen)-2nd Attempt                                                            | 4,080.00  |
| 6                              | PKG13001/2 | (IVF/D Case) Embryo Transfer(Fresh/Frozen)-3rd Attempt                                                            | 3,315.00  |
| Clinical Services / Procedures |            |                                                                                                                   |           |
| 1                              | IVF0001    | IVF - U/S Transvaginal - Initial                                                                                  | 500.00    |
| 2                              | IVF0002    | IVF - U/S Transvaginal - Follow-Up                                                                                | 250.00    |
| 3                              | IVF0003    | IVF - Semen Analysis                                                                                              | 200.00    |
| 4                              | IVF0004    | IVF - Freezing Extra Embryos - per year                                                                           | 1,100.00  |
| 5                              | IVF0005    | IVF - Sperm Freezing (Maximum 4ml - per year)                                                                     | 750.00    |
| 6                              | IVF0006    | CGT- Genetic Compatibility Test (6-7 weeks)                                                                       | 3,600.00  |
| 7                              | IVF0007    | BRCA1-BRCA2 (6-7 weeks)                                                                                           | 3,800.00  |
| 8                              | IVF0008    | BRCA1-BRCA2 with MLPA (6-7 weeks)                                                                                 | 4,500.00  |
| 9                              | IVF0009    | ERA- Endometrial Receptivity Array (15 Days)                                                                      | 3,800.00  |
| 10                             | IVF0010    | PGS- aCGH 24sure Preimplantational Chromosomal Screening - 1/4 Embryos (24 Hours)                                 | 9,900.00  |
| 11                             | IVF0011    | PGS- aCGH 24sure Preimplantational Chromosomal Screening - 5/8 Embryos (24 Hours)                                 | 11,250.00 |
| 12                             | IVF0012    | PGS- aCGH 24sure Preimplantational Chromosomal Screening - 9/12 Embryos (24 Hours)                                | 14,180.00 |
| 13                             | IVF0013    | PGS- aCGH 24sure Preimplantational Chromosomal Screening - 13/16 Embryos (24 Hours)                               | 16,800.00 |
| 14                             | IVF0014    | PGS- aCGH 24sure plus Preimplantational Chromosomal Screening - 1/4 Embryos (24 Hours)                            | 10,900.00 |
| 15                             | IVF0015    | PGS- aCGH 24sure plus Preimplantational Chromosomal Screening - 5/8 Embryos (24 Hours)                            | 12,250.00 |
| 16                             | IVF0016    | PGS- aCGH 24sure plus Preimplantational Chromosomal Screening - 9/12 Embryos (24 Hours)                           | 15,180.00 |
| 17                             | IVF0017    | PGS- aCGH 24sure plus Preimplantational Chromosomal Screening - 13/16 Embryos (24 Hours)                          | 17,800.00 |
| 18                             | IVF0018    | PGD Single Gene Disorder - 1.1 Frequent diseases, Informativity test for our panel of frequent diseases (7 Days)  | 4,460.00  |
| 19                             | IVF0019    | PGD Single Gene Disorder - 1.2 Frequent disease, First Cycle of PGD (no limit of number of embryos (24 Hours)     | 9,400.00  |
| 20                             | IVF0020    | PGD Single Gene Disorder - 1.3 Frequent diseases, PGS to be included for all embryos (24 Hours)                   | 9,900.00  |
| 21                             | IVF0021    | PGD Single Gene Disorder - 1.1 New genetic diseases, New protocol development (6-8 weeks)                         | 5,400.00  |
| 22                             | IVF0022    | PGD Single Gene Disorder - 1.2 New genetic diseases, First Cycle of PGD (no limit of number of embryos (24 hours) | 9,400.00  |
| 23                             | IVF0023    | PGD Single Gene Disorder - 1.3 New genetic diseases, PGS to be included for all embryos (24 hours)                | 9,900.00  |
| 24                             | IVF0024    | Hereditary Disease screening (blood samples) - Beta thalasemia (7-8 weeks)                                        | 2,100.00  |
| 25                             | IVF0025    | Hereditary Disease screening (blood samples) - Spinal muscular atrophy (4 weeks)                                  | 1,500.00  |
| 26                             | IVF0026    | Hereditary Disease screening (blood samples) - Cystic Fibrosis (7 days)                                           | 790.00    |
| 27                             | IVF0027    | Hereditary Disease screening (blood samples) - Fragile-X (7 days)                                                 | 790.00    |

Mustafa El-Ahwal (MBA, FCA, ACCA)  
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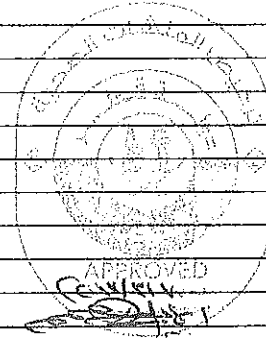


المستشفى الأهلي  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE    | DESCRIPTION                                                                                                                                                                                 | PRICE (QAR) |
|----|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 28 | IVF0028 | Hereditary Disease screening (blood samples) - Trombofilia - MTHFR (7 days)                                                                                                                 | 770.00      |
| 29 | IVF0029 | Hereditary Disease screening (blood samples) - Trombofilia - Factor V Leiden (7 days)                                                                                                       | 660.00      |
| 30 | IVF0030 | Hereditary Disease screening (blood samples) - Trombofilia - Factor II (7 days)                                                                                                             | 600.00      |
| 31 | IVF0031 | Monogenic disorder Prenatal Amniotic-CVS Fluid analysis - Frecuent Disease (7 days)                                                                                                         | 3,500.00    |
| 32 | IVF0032 | Monogenic disorder Prenatal Amniotic-CVS Fluid analysis - Not Frecuent Disease (3 weeks)                                                                                                    | 5,900.00    |
| 33 | IVF0033 | NACE Non Invasive Prenatal Analysis for Chromosomal Examination - NACE PLUS -fetal Trisomy 21, 18, 16, 13, 9 and chromosomal aneuploidies in X and Y and 6 extra microdeletions (7-10 days) | 4,000.00    |
| 34 | IVF0034 | NACE Non Invasive Prenatal Analysis for Chromosomal Examination - NACE -fetal Trisomy 21, 18, 13 and chromosomal aneuploidies in X and Y (7-10 days)                                        | 3,000.00    |
| 35 | IVF0035 | POC using aCGH- Product of Conception using aCGH (1-2 weeks)                                                                                                                                | 2,500.00    |
| 36 | IVF0036 | SAT: Sperma Aneploidy Test - SAT: Sperma Aneploidy Test - FISH semen (X, Y, 13, 18, 21) (2 weeks)                                                                                           | 2,500.00    |
| 37 | IVF0037 | Patient case analysis and Genetic counselling (2 days)                                                                                                                                      | 1,200.00    |
| 38 | IVF0038 | Translocation analysis and Genetic counselling (5 days)                                                                                                                                     | 2,100.00    |
| 39 | IVF0039 | Real cases by Embryologist from Igenomix - EMBRYO BIOPSY + TUBING/LOADING per Patient (24 hours)                                                                                            | 4,700.00    |
| 40 | IVF0040 | Training by Embryologist from Igenomix - EMBRYO BIOPSY + TUBING/LOADING (2 days training)                                                                                                   | 9,500.00    |
| 41 | IVF0041 | PGS - Includes Mitoscope 1-2 Embryos (Fresh Cases)                                                                                                                                          | 4,500.00    |
| 42 | IVF0042 | PGS - Includes Mitoscope 3-4 Embryos (Fresh Cases)                                                                                                                                          | 9,000.00    |
| 43 | IVF0043 | PGS - Includes Mitoscope 5-6 Embryos (Fresh Cases)                                                                                                                                          | 9,810.00    |
| 44 | IVF0044 | PGS - Includes Mitoscope 7-8 Embryos (Fresh Cases)                                                                                                                                          | 10,800.00   |
| 45 | IVF0045 | PGS - Includes Mitoscope 9-12 Embryos (Fresh Cases)                                                                                                                                         | 13,500.00   |
| 46 | IVF0046 | PGS - Includes Mitoscope 13-16 Embryos (Fresh Cases)                                                                                                                                        | 16,200.00   |
| 47 | IVF0047 | PGS - Includes Mitoscope 1-2 Embryos (Frozen Cases)                                                                                                                                         | 4,275.00    |
| 48 | IVF0048 | PGS - Includes Mitoscope 3-4 Embryos (Frozen Cases)                                                                                                                                         | 8,415.00    |
| 49 | IVF0049 | PGS - Includes Mitoscope 5-6 Embryos (Frozen Cases)                                                                                                                                         | 9,045.00    |
| 50 | IVF0050 | PGS - Includes Mitoscope 7-8 Embryos (Frozen Cases)                                                                                                                                         | 9,810.00    |
| 51 | IVF0051 | PGS - Includes Mitoscope 9-12 Embryos (Frozen Cases)                                                                                                                                        | 12,150.00   |
| 52 | IVF0052 | PGS - Includes Mitoscope 13-16 Embryos (Frozen Cases)                                                                                                                                       | 14,760.00   |
| 53 | IVF0053 | CGT- 600 -Genetic Compatibility Test                                                                                                                                                        | 3,555.00    |
| 54 | IVF0054 | Pre-PGD: New protocol development                                                                                                                                                           | 5,220.00    |



| LABORATORY INVESTIGATION |          |                                                   |          |
|--------------------------|----------|---------------------------------------------------|----------|
| 1                        | LAB02364 | Factor II                                         | 220.00   |
| 2                        | LAB02365 | Factor IX                                         | 220.00   |
| 3                        | LAB02366 | Factor V                                          | 220.00   |
| 4                        | LAB02368 | Factor VII                                        | 220.00   |
| 5                        | LAB02369 | Factor VIII Activity (von Willebrand Factor)      | 220.00   |
| 6                        | LAB02370 | Factor VIII Associated Antigen (vWF:AG)           | 300.00   |
| 7                        | LAB02372 | Factor VIII Ristocetin Cofactor (vWF:RCO)         | 280.00   |
| 8                        | LAB02373 | Factor X                                          | 220.00   |
| 9                        | LAB02375 | Factor XI                                         | 220.00   |
| 10                       | LAB02376 | Factor XII                                        | 220.00   |
| 11                       | LAB02377 | Factor XIII                                       | 640.00   |
| 12                       | LAB02528 | Chromosomal Analysis (Karyotype), HMC Lab         | 1,120.00 |
| 13                       | LAB02529 | Chromosomal Analysis (Karyotype), Bioscientia Lab | 1,800.00 |
| 14                       | LAB02530 | Paternity testing/Kinship testing                 | 5,870.00 |
| 15                       | LAB0333  | Creatinine, Random Urine                          | 60.00    |



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المستشفى الأهلي  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                                                     | PRICE (QAR) |
|----|----------|---------------------------------------------------------------------------------|-------------|
| 16 | LAB10000 | Nasopharyngeal biopsy                                                           | 840.00      |
| 17 | LAB10001 | Soft tissue biopsy                                                              | 840.00      |
| 18 | LAB10002 | Hemorrhoidectomy                                                                | 840.00      |
| 19 | LAB10003 | ABO Group & Rh Type (Tube Method)                                               | 35.00       |
| 20 | LAB10004 | Antibody Screening (Indirect Coombs) (HMC)                                      | 200.00      |
| 21 | LAB10005 | Influenza A and B Viruses Ag, nasopharyngeal                                    | 160.00      |
| 22 | LAB10006 | TB Abs (immunoassay), serum                                                     | 150.00      |
| 23 | LAB10007 | Aspergillus Antigen                                                             | 310.00      |
| 24 | LAB10008 | Aspergillus IgG & IgM                                                           | 590.00      |
| 25 | LAB10009 | Aspergillus IgG abs Fumigatus                                                   | 300.00      |
| 26 | LAB10010 | Hemicolectomy                                                                   | 2,200.00    |
| 27 | LAB10011 | AP resection biopsy                                                             | 2,200.00    |
| 28 | LAB10012 | Total (sub-total) colectomy                                                     | 3,500.00    |
| 29 | LAB10013 | Suspicious naevus                                                               | 840.00      |
| 30 | LAB10015 | Lymph node biopsy (suspected lymphoma)                                          | 2,500.00    |
| 31 | LAB10016 | Bony biopsy                                                                     | 840.00      |
| 32 | LAB10017 | Immunohistochemistry Special marker study ( 1-4 SLIDES )                        | 1,000.00    |
| 33 | LAB10018 | Immunohistochemistry Extended special marker study(5 slides and above)          | 2,000.00    |
| 34 | LAB10019 | histopathology second opinion AAH                                               | 1,000.00    |
| 35 | LAB10020 | Frozen section for breast excision margins                                      | 2,000.00    |
| 36 | LAB10025 | Sickle Cells Test (Screen)                                                      | 100.00      |
| 37 | LAB10026 | Chloride,urine spot                                                             | 80.00       |
| 38 | LAB10027 | Array CGH Analysis(244k arrays)                                                 | 13,600.00   |
| 39 | LAB101   | TORCH IgG (Toxo,Rubella,CMV,HSV)                                                | 650.00      |
| 40 | LAB102   | TORCH IgM (Toxo,Rubella,CMV,HSV)                                                | 750.00      |
| 41 | LAB103   | Antenatal Profile (ABO,CBC,HBsAg, HCV, HIV, RPR, Rub, Urine, Glu)               | 850.00      |
| 42 | LAB104   | Female Infertility Profile (LH,FSH,Prolactin,TSH, Estrad., Prog.)               | 1,050.00    |
| 43 | LAB105   | Male Infertility Profile (LH,FSH,Prolactin,Estrad, Testo)                       | 850.00      |
| 44 | LAB106   | Hirsutism (Testo,LH,FSH,DHEAS,17OHProg)                                         | 1,080.00    |
| 45 | LAB107   | Polycystic Ovary Syndrome Profile(LH,FSH,Prola, Testo, Insulin)                 | 850.00      |
| 46 | LAB108   | STD Female Profile (Hvswab C, HSV1, Chlam Ag swab, RPR)                         | 650.00      |
| 47 | LAB10847 | Type & screen & crossmatch 1 unit adult, transfusion service                    | 300.00      |
| 48 | LAB109   | STD Profile Male                                                                | 450.00      |
| 49 | LAB110   | Thyroid Profile 1 (FT4, TSH)                                                    | 360.00      |
| 50 | LAB111   | Thyroid Profile 2 (FT4,TSH, FT3, Anti TG)                                       | 650.00      |
| 51 | LAB112   | Electrolyte Profile (Na, K, Bicarb, Cl)                                         | 280.00      |
| 52 | LAB113   | Lipid Profile (TC, Trig, HDL, LDL)                                              | 300.00      |
| 53 | LAB114   | Renal Profile 1 (Na,K,Cl, Bicab, U, Cr)                                         | 370.00      |
| 54 | LAB115   | Renal Profile 2 { Comp} (Na,K,Cl, Bicab, U, Cr, P, Uric, Ca, Mg)                | 625.00      |
| 55 | LAB116   | Cardiac Profile (Myoglobin, CKMB, Trop)                                         | 420.00      |
| 56 | LAB117   | Liver Profile (Function Tests) (Bili, ALP, TP, Alb, ALT, AST)                   | 430.00      |
| 57 | LAB118   | Liver Enzymes Profile (ALT,AST,ALP)                                             | 215.00      |
| 58 | LAB119   | Iron Profile (Iron,TIBC, Ferritin)                                              | 350.00      |
| 59 | LAB120   | Anaemia Profile (Iron,TIBC, Ferritin, B12,Folic, Transferrin)                   | 850.00      |
| 60 | LAB121   | Coagulation Profile (CBC,PT/INR, PTT)                                           | 300.00      |
| 61 | LAB122   | Disseminated Intravascular Coag. (DIC) (CBC,PT/INR, PTT, Fibrinogen, D-Dimer)   | 500.00      |
| 62 | LAB123   | Comprehensive Metabolic Profile                                                 | 1,500.00    |
| 63 | LAB124   | Well Man Screen (CBC, ESR, PSA total & free, TSH, FT4, ABO & metabolic profile) | 2,000.00    |
| 64 | LAB125   | Well Woman Screen (CBC, Glu, PAP, Chl. Ag, TSH, FT4 and lipid profile)          | 1,050.00    |
| 65 | LAB126   | Needle Stick Injury (Community) (HBsAg & Ab, HepCAb, HIV 1)                     | 600.00      |
| 66 | LAB127   | Pre-operative profile 1 (CBC, HBsAg, UE, HCV Ab, HIV, UE, Glu)                  | 600.00      |
| 67 | LAB128   | Pre-operative Profile2 (CBC,HBsAg,UE,INR,PTT,LFT,Renal,HBsAg,HCV Ab,HIV,UE,G)   | 1,300.00    |

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# AL-AHLI HOSPITAL PRICE LIST

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| SR  | CODE     | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                            | PRICE (QAR) |
|-----|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 68  | LAB130   | Pre-marital Screen 2<br>Hepatitis B surface Antigen Screen - 200.00<br>Hepatitis C Virus Antibody (HCV-Ab) - 205.00<br>HIV 1&2 Ab Screen - 200.00<br>ABO Group & Rh Type (Slide Method) - 25.00<br>Treponema pallidum Antibody - 150.00<br>Sickle Cells Test (Screen) - 100.00<br>Hemoglobin Electrophoresis - 200.00<br>Glucose, Fasting, Plasma - 50.00<br>CBC with Platelet Count & Automated Differential - 110.00 | 1,240.00    |
| 69  | LAB13008 | Type & screen & crossmatch 1 unit newborn, transfusion service                                                                                                                                                                                                                                                                                                                                                         | 200.00      |
| 70  | LAB13015 | Helicobacter Pylori Rapid Urease Test (Gastric Biopsy)                                                                                                                                                                                                                                                                                                                                                                 | 150.00      |
| 71  | LAB131   | Liver Profile 2 (ALT, AST, PT)                                                                                                                                                                                                                                                                                                                                                                                         | 200.00      |
| 72  | LAB132   | Hepatitis B virus profile (HB coreAB, HBeAb)                                                                                                                                                                                                                                                                                                                                                                           | 500.00      |
| 73  | LAB133   | Food Handler profile                                                                                                                                                                                                                                                                                                                                                                                                   | 915.00      |
| 74  | LAB134   | Pre-Employment Screen                                                                                                                                                                                                                                                                                                                                                                                                  | 1,100.00    |
| 75  | LAB135   | Employment annual Screen / age below 40 years                                                                                                                                                                                                                                                                                                                                                                          | 675.00      |
| 76  | LAB136   | Employment annual Screen / age above 40 years                                                                                                                                                                                                                                                                                                                                                                          | 900.00      |
| 77  | LAB137   | Pre-endoscopic screen                                                                                                                                                                                                                                                                                                                                                                                                  | 900.00      |
| 78  | LAB138   | Hepatitis profile (Hep AlgM, HBsAg, HCV Ab)                                                                                                                                                                                                                                                                                                                                                                            | 500.00      |
| 79  | LAB139   | Pediatrics allergy panel 20                                                                                                                                                                                                                                                                                                                                                                                            | 600.00      |
| 80  | LAB140   | Allergy profile (total IgE+inhalation panel 20)                                                                                                                                                                                                                                                                                                                                                                        | 680.00      |
| 81  | LAB141   | Inhalation allergy panel 20                                                                                                                                                                                                                                                                                                                                                                                            | 600.00      |
| 82  | LAB142   | Food Allergy Panel 20                                                                                                                                                                                                                                                                                                                                                                                                  | 600.00      |
| 83  | LAB143   | Neonatal metabolic screen (card), service charge                                                                                                                                                                                                                                                                                                                                                                       | 85.00       |
| 84  | LAB144   | Chem 7 (Na, K, CO <sub>2</sub> , Cl, U, Creat, Glu)                                                                                                                                                                                                                                                                                                                                                                    | 450.00      |
| 85  | LAB145   | Chem 8 (Na, K, CO <sub>2</sub> , Cl, U, Creat, Glu, Ca)                                                                                                                                                                                                                                                                                                                                                                | 500.00      |
| 86  | LAB146   | Chem 12 (Na, K, CO <sub>2</sub> , Cl, U, Creat, Glu, Ca, P, Alb, ALT, AST)                                                                                                                                                                                                                                                                                                                                             | 809.00      |
| 87  | LAB147   | Cardiac Profile 2                                                                                                                                                                                                                                                                                                                                                                                                      | 800.00      |
| 88  | LAB148   | Microbiology Consultation                                                                                                                                                                                                                                                                                                                                                                                              | 150.00      |
| 89  | LAB149   | Pre-Cath Profile                                                                                                                                                                                                                                                                                                                                                                                                       | 1,060.00    |
| 90  | LAB151   | Dietary Lab. Test package                                                                                                                                                                                                                                                                                                                                                                                              | 424.00      |
| 91  | LAB152   | Pre-dental procedure profile                                                                                                                                                                                                                                                                                                                                                                                           | 450.00      |
| 92  | LAB2000  | 11-Deoxycortisol (Compound S)                                                                                                                                                                                                                                                                                                                                                                                          | 340.00      |
| 93  | LAB20001 | Sodium, Plasma or Serum                                                                                                                                                                                                                                                                                                                                                                                                | 90.00       |
| 94  | LAB20002 | Potassium, Plasma or Serum                                                                                                                                                                                                                                                                                                                                                                                             | 90.00       |
| 95  | LAB20003 | Chloride, Serum or Plasma                                                                                                                                                                                                                                                                                                                                                                                              | 90.00       |
| 96  | LAB20004 | Carbon Dioxide (Bicarbonate), Serum or Plasma                                                                                                                                                                                                                                                                                                                                                                          | 70.00       |
| 97  | LAB20005 | Alkaline Phosphatase, Serum or Plasma                                                                                                                                                                                                                                                                                                                                                                                  | 116.00      |
| 98  | LAB20006 | Lactate Dehydrogenase, Plasma or Serum (LDH)                                                                                                                                                                                                                                                                                                                                                                           | 80.00       |
| 99  | LAB20007 | Aspartate Aminotransferase (AST), Serum or Plasma                                                                                                                                                                                                                                                                                                                                                                      | 75.00       |
| 100 | LAB20008 | Alanine Aminotransferase (ALT), Serum or Plasma                                                                                                                                                                                                                                                                                                                                                                        | 75.00       |
| 101 | LAB20009 | Gamma Glutamyl Transferase (GGT), Serum or Plasma                                                                                                                                                                                                                                                                                                                                                                      | 80.00       |
| 102 | LAB2001  | 17-Hydroxycorticosteroids - Urine 24                                                                                                                                                                                                                                                                                                                                                                                   | 520.00      |
| 103 | LAB20010 | Creatine Kinase, Total, Serum or Plasma                                                                                                                                                                                                                                                                                                                                                                                | 125.00      |
| 104 | LAB20011 | Low vaginal swab (Culture & Sensitivity)                                                                                                                                                                                                                                                                                                                                                                               | 240.00      |
| 105 | LAB20012 | Vulval swab culture & sensitivity                                                                                                                                                                                                                                                                                                                                                                                      | 220.00      |
| 106 | LAB20013 | Amylase, Plasma or Serum, Urine                                                                                                                                                                                                                                                                                                                                                                                        | 130.00      |
| 107 | LAB20014 | Lipase, Plasma or Serum                                                                                                                                                                                                                                                                                                                                                                                                | 130.00      |
| 108 | LAB20016 | Rheumatoid factor screen                                                                                                                                                                                                                                                                                                                                                                                               | 100.00      |
| 109 | LAB20017 | Semen fructose                                                                                                                                                                                                                                                                                                                                                                                                         | 280.00      |
| 110 | LAB20018 | Quadruple test (Second Trimester Screen)                                                                                                                                                                                                                                                                                                                                                                               | 770.00      |

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| SR  | CODE        | DESCRIPTION                                         | PRICE (QAR) |
|-----|-------------|-----------------------------------------------------|-------------|
| 111 | LAB20019    | Frozen section                                      | 500.00      |
| 112 | LAB2002     | 17-Hydroxypregnenolone                              | 580.00      |
| 113 | LAB20020    | Glucose-6-phosphate deh.(G6PD)quantitation          | 180.00      |
| 114 | LAB20021    | Ph                                                  | 30.00       |
| 115 | LAB20022    | Fine Needle Aspiration (FNA),under U/S guide        | 500.00      |
| 116 | LAB20023    | Urea Nitrogen, Plasma or Serum                      | 60.00       |
| 117 | LAB20024F   | Glucose, Fasting, Plasma                            | 50.00       |
| 118 | LAB20024PP  | Glucose, 2 hours postprandial, Plasma               | 50.00       |
| 119 | LAB20024R   | Glucose, Random, Plasma                             | 50.00       |
| 120 | LAB20025    | Creatinine, Serum or Plasma                         | 60.00       |
| 121 | LAB20026    | Uric Acid, Serum or Plasma                          | 60.00       |
| 122 | LAB20027    | Calcium, Serum or Plasma                            | 80.00       |
| 123 | LAB20028    | Phosphorus, Inorganic, Plasma or Serum              | 80.00       |
| 124 | LAB20029    | Protein, Total, Plasma or Serum                     | 80.00       |
| 125 | LAB2003     | 17-Hydroxyprogesterone                              | 320.00      |
| 126 | LAB20030    | Albumin, Serum or Plasma                            | 110.00      |
| 127 | LAB20031    | Cholesterol, Serum or Plasma                        | 100.00      |
| 128 | LAB20032    | Bilirubin, Total, Serum or Plasma                   | 60.00       |
| 129 | LAB20033    | Bilirubin, Direct, Serum or Plasma                  | 60.00       |
| 130 | LAB20035    | Dengue virus Antibodies IgG & IgM                   | 550.00      |
| 131 | LAB20037    | Iron, Plasma or Serum                               | 80.00       |
| 132 | LAB20039    | Magnesium, Plasma or Serum                          | 80.00       |
| 133 | LAB20040    | Triglycerides, Plasma or Serum                      | 100.00      |
| 134 | LAB20043    | Ammonia, Plasma                                     | 100.00      |
| 135 | LAB20045    | Lactic Acid, Plasma                                 | 100.00      |
| 136 | LAB20046    | Osmolality, Serum or Plasma                         | 90.00       |
| 137 | LAB200481   | Tissue Biopsy: Small                                | 420.00      |
| 138 | LAB200492   | Tissue Biopsy: Medium                               | 580.00      |
| 139 | LAB2005     | 18-Hydroxycorticosterone                            | 530.00      |
| 140 | LAB200503   | Tissue Biopsy: Large                                | 840.00      |
| 141 | LAB200514   | Bone Biopsy                                         | 600.00      |
| 142 | LAB200515   | CSF Analysis (Cell count,Gran stain,Protein, Suger) | 250.00      |
| 143 | LAB200521   | PAP Smear - Cervical Smear (Conventional)           | 300.00      |
| 144 | LAB20053    | High Density Lipoprotein Cholesterol (HDL)          | 100.00      |
| 145 | LAB200548   | Urine Cytology                                      | 250.00      |
| 146 | LAB200559US | Fine Needle Aspiration (FNA)                        | 400.00      |
| 147 | LAB200561   | Sputum Cytology                                     | 250.00      |
| 148 | LAB200562   | PAP BRUSH and VIAL                                  | 120.00      |
| 149 | LAB200572   | Nipple Discharge Cytology                           | 200.00      |
| 150 | LAB200583   | Body fluids cytology                                | 320.00      |
| 151 | LAB200594   | Bronchial Wash Cytology                             | 275.00      |
| 152 | LAB2006     | 1-Hydroxypyrene - Urine                             | 280.00      |
| 153 | LAB200605   | Bronchial Brush Cytology                            | 275.00      |
| 154 | LAB200616   | Gastric Wash Cytology                               | 275.00      |
| 155 | LAB200627   | Gastric Brush Cytology                              | 275.00      |
| 156 | LAB20063    | Pregnancy test screen (Serum)                       | 75.00       |
| 157 | LAB2007     | 21-Desoxycortisol                                   | 560.00      |
| 158 | LAB2008     | 21-Desoxycortisol - Urine 24h                       | 560.00      |
| 159 | LAB2009     | 3-Alpha-Androstadiol Glucuronide                    | 560.00      |
| 160 | LAB20090    | Hepatitis B Virus Surface Antibody                  | 200.00      |
| 161 | LAB20091    | Hepatitis B core Antibody, Total                    | 200.00      |
| 162 | LAB20092    | Hepatitis B core Antibody, IgM                      | 200.00      |
| 163 | LAB20093    | Hepatitis A Virus Antibody, IgM                     | 200.00      |

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# AL-AHLI HOSPITAL PRICE LIST

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| SR  | CODE     | DESCRIPTION                                                          | PRICE (QAR) |
|-----|----------|----------------------------------------------------------------------|-------------|
| 164 | LAB20094 | Hepatitis Be Antigen                                                 | 200.00      |
| 165 | LAB20095 | Hepatitis Be Antibody                                                | 200.00      |
| 166 | LAB20096 | Anti-Mullerian hormone (AMH)                                         | 580.00      |
| 167 | LAB20099 | Hepatitis C Virus Antibody (HCV-Ab)                                  | 210.00      |
| 168 | LAB2010  | 5 HIAA 5-Hydroxyindoleacetic Acid - Urine 24h (Serotonin Metabolite) | 150.00      |
| 169 | LAB20110 | Products of conception (POC) chromosome analysis                     | 2,400.00    |
| 170 | LAB2012  | 5-Hydroxytryptophan                                                  | 430.00      |
| 171 | LAB20128 | Hepatitis B surface Antigen Screen                                   | 200.00      |
| 172 | LAB2013  | Acetaminophen (Tylenol/Paracetamol)                                  | 320.00      |
| 173 | LAB2014  | Acetone - Urine                                                      | 340.00      |
| 174 | LAB2015  | Acetylcholinesterase - Amniotic Fluid                                | 370.00      |
| 175 | LAB20154 | Sodium, Fluid                                                        | 90.00       |
| 176 | LAB20155 | Potassium, Fluid                                                     | 90.00       |
| 177 | LAB2016  | Acetylcholine Receptor Antibodies                                    | 700.00      |
| 178 | LAB20160 | HIV 1&2 Ag/Ab (Combo)                                                | 520.00      |
| 179 | LAB20161 | First trimester screening                                            | 650.00      |
| 180 | LAB20163 | Chloride, Fluid                                                      | 90.00       |
| 181 | LAB2017  | Acetylcholinesterase - Blood                                         | 100.00      |
| 182 | LAB20178 | HIV 1&2 Ab Screen                                                    | 200.00      |
| 183 | LAB2018  | Acetylsalicylic acid - Urine                                         | 270.00      |
| 184 | LAB20183 | Urea Nitrogen, Fluid                                                 | 60.00       |
| 185 | LAB2019  | Acid Phosphatase, Prostatic & total (ACP)                            | 160.00      |
| 186 | LAB2021  | Acinus Cell Antibodies                                               | 200.00      |
| 187 | LAB2022  | Actin Abs                                                            | 270.00      |
| 188 | LAB20228 | Osmolality, Urine                                                    | 100.00      |
| 189 | LAB20229 | Pregnancy test screen (Urine)                                        | 75.00       |
| 190 | LAB2023  | Activated Protein C Resistance (ACP 2) (Screen Factor V Leiden)      | 403.00      |
| 191 | LAB2024  | Acylcarnitine structure                                              | 440.00      |
| 192 | LAB2025  | Acylcarnitine structure - Urine 24h                                  | 440.00      |
| 193 | LAB20257 | Low Density Lipoprotein (LDL), Indirect                              | 300.00      |
| 194 | LAB2027  | Adenosine 3,5 Monophosphate Cyclic (CAMP)                            | 220.00      |
| 195 | LAB2029  | Adenovirus Abs (Adenovirus Serology)                                 | 150.00      |
| 196 | LAB2030  | Adenovirus Antigen                                                   | 880.00      |
| 197 | LAB20304 | Urine, Specific Gravity                                              | 30.00       |
| 198 | LAB2031  | ADH & Osmolality (Anti Duretic Hormone)                              | 680.00      |
| 199 | LAB2032  | Adrenal Cortex Antibodies                                            | 220.00      |
| 200 | LAB2033  | Adrenocorticotrophic Hormone Intact (ACTH, Corticot)                 | 450.00      |
| 201 | LAB2035  | Albumin - CSF                                                        | 110.00      |
| 202 | LAB2036  | Albumin - Faeces                                                     | 110.00      |
| 203 | LAB20374 | Stool, Occult Blood                                                  | 70.00       |
| 204 | LAB20375 | Stool, Starch Microscopy                                             | 40.00       |
| 205 | LAB2038  | Aldolase                                                             | 160.00      |
| 206 | LAB2039  | Aldosterone                                                          | 430.00      |
| 207 | LAB20399 | Bilirubin Indirect                                                   | 100.00      |
| 208 | LAB2040  | Aldosterone - Urine 24h                                              | 430.00      |
| 209 | LAB20408 | Globulin (Serum)                                                     | 70.00       |
| 210 | LAB2041  | Aldosterone-18-Glucuronide - Urine 24h                               | 360.00      |
| 211 | LAB20414 | Creatine Kinase MB                                                   | 100.00      |
| 212 | LAB2042  | Alkaline Leukocyte Phosphatase (LAP)                                 | 140.00      |
| 213 | LAB20420 | Total Iron Binding Capacity (TIBC)                                   | 180.00      |
| 214 | LAB20426 | Bilirubin, Direct & Total, Serum or Plasma                           | 120.00      |
| 215 | LAB2044  | Alkaline Phosphatase Isoenzymes                                      | 470.00      |
| 216 | LAB2045  | Alkaline Phosphatase, Bone Specific (Ostase)                         | 340.00      |

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# AL-AHLI HOSPITAL PRICE LIST

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| SR  | CODE      | DESCRIPTION                                             | PRICE (QAR) |
|-----|-----------|---------------------------------------------------------|-------------|
| 217 | LAB2046   | Alkaline phosphatase, Placental                         | 360.00      |
| 218 | LAB2047   | Allergy - 2 Sp. Test                                    | 280.00      |
| 219 | LAB20472  | Calcium, Urine                                          | 80.00       |
| 220 | LAB20473  | Creatinine, 24-Hour Urine                               | 100.00      |
| 221 | LAB20474  | Creatinine Clearance                                    | 155.00      |
| 222 | LAB20477  | Magnesium, Urine                                        | 80.00       |
| 223 | LAB20478  | Phosphorus, Urine                                       | 80.00       |
| 224 | LAB20479  | Protein, Total, Urine                                   | 170.00      |
| 225 | LAB2048   | Allergy - 3 Sp. Test                                    | 380.00      |
| 226 | LAB20480  | Urea Nitrogen, Urine                                    | 60.00       |
| 227 | LAB20481  | Uric Acid, Urine                                        | 60.00       |
| 228 | LAB2049   | Allergy - 4 Sp. Test                                    | 500.00      |
| 229 | LAB20498  | Electrolytes, Urine                                     | 280.00      |
| 230 | LAB20502  | Protein, Total, Body Fluid                              | 80.00       |
| 231 | LAB20503  | Glucose, Body Fluid                                     | 50.00       |
| 232 | LAB20506  | Amylase, Pancreatic                                     | 130.00      |
| 233 | LAB20513  | Uric Acid, Body Fluid                                   | 60.00       |
| 234 | LAB20514  | Protein, Total, CSF                                     | 80.00       |
| 235 | LAB20515  | Glucose, CSF                                            | 50.00       |
| 236 | LAB20542  | Glucose Tolerance Test, Male or Non pregnant Female     | 230.00      |
| 237 | LAB20543  | Glucose Tolerance Test, Pregnancy                       | 230.00      |
| 238 | LAB20543A | Glucose Screen, one sample (one hour post 50 g glucose) | 80.00       |
| 239 | LAB20544  | Chlamydia Trachomatis Antigen Qualitative Test          | 150.00      |
| 240 | LAB2057   | Allergy - One Single Spec. Allergy Test                 | 150.00      |
| 241 | LAB20570  | Urinalysis, Dipstick (Glucose, Acetone, PH, Protein)    | 40.00       |
| 242 | LAB2058   | Alpha Hydroxybutyric Dehydrogenase (HBDH)               | 80.00       |
| 243 | LAB2059   | Alpha Galactosidase - Blood                             | 200.00      |
| 244 | LAB20591  | Hepatitis A Virus Antibodies IgG                        | 200.00      |
| 245 | LAB2060   | Alpha Glucosidase - Blood                               | 200.00      |
| 246 | LAB2061   | Alpha Iduronidase - Blood                               | 160.00      |
| 247 | LAB2062   | Alpha Interferone                                       | 720.00      |
| 248 | LAB2063   | Alpha Mannosidase                                       | 160.00      |
| 249 | LAB2064   | Alpha-1-Antitrypsin                                     | 230.00      |
| 250 | LAB2065   | Alpha-1-Antitrypsin - Faeces                            | 230.00      |
| 251 | LAB2066   | Alpha-1-Antitrypsin Phenotype                           | 340.00      |
| 252 | LAB2068   | Alpha-1-Fetoprotein, AFP - Amniotic Fluid               | 230.00      |
| 253 | LAB2069   | Alpha-1-Glycoprotein                                    | 70.00       |
| 254 | LAB2070   | Alpha-2-Antiplasmin                                     | 200.00      |
| 255 | LAB2071   | Alpha-2-Glycoprotein                                    | 70.00       |
| 256 | LAB2072   | Alpha-2-Macroglobulin                                   | 70.00       |
| 257 | LAB2073   | Alprazolam                                              | 310.00      |
| 258 | LAB2074   | Aluminium                                               | 230.00      |
| 259 | LAB2075   | Aluminium - Urine                                       | 230.00      |
| 260 | LAB2076   | Amantadin                                               | 630.00      |
| 261 | LAB2077   | Amikacin Level                                          | 250.00      |
| 262 | LAB2078   | Amino Acids Quantitative - CSF                          | 680.00      |
| 263 | LAB2079   | Amino Acids Quantitative                                | 980.00      |
| 264 | LAB2080   | Amino Acids Quantitative - Urine                        | 980.00      |
| 265 | LAB2081   | Aminoantipyrine                                         | 350.00      |
| 266 | LAB2082   | Amiodarone & Desethylamiodarone                         | 320.00      |
| 267 | LAB2083   | Amisulpride                                             | 480.00      |
| 268 | LAB2084   | Amitriptyline & Nortriptyline                           | 320.00      |
| 269 | LAB20849  | Potassium-urine-24hrs                                   | 80.00       |

Mustafa El-Ahwal (MDA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital





المستشفى الأهلي  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                              | PRICE (QAR) |
|-----|----------|----------------------------------------------------------|-------------|
| 270 | LAB20850 | Chloride urine 24hrs                                     | 80.00       |
| 271 | LAB20851 | Sodium Urine 24hrs                                       | 80.00       |
| 272 | LAB2086  | Amoebic (E. histolytica) Abs                             | 200.00      |
| 273 | LAB2087  | Amoxicillin                                              | 320.00      |
| 274 | LAB2090  | Amphiphysine Abs Structure                               | 490.00      |
| 275 | LAB2091  | Amphotericin B Level                                     | 259.00      |
| 276 | LAB2095  | Amylase Isoenzymes                                       | 230.00      |
| 277 | LAB2096  | Amyloid A                                                | 280.00      |
| 278 | LAB2097  | Androstenedione                                          | 240.00      |
| 279 | LAB2098  | Angiotensin Converting Enzyme (ACE) - CSF                | 360.00      |
| 280 | LAB2099  | Angiotensin Converting Enzyme (ACE)                      | 360.00      |
| 281 | LAB2102  | Antimony                                                 | 680.00      |
| 282 | LAB2103  | Antimony - Urine                                         | 680.00      |
| 283 | LAB2104  | Antithrombin III Activity                                | 150.00      |
| 284 | LAB2105  | ApoLipoprotein A1                                        | 100.00      |
| 285 | LAB2106  | ApoLipoprotein B                                         | 100.00      |
| 286 | LAB2107  | Apolipoprotein E Genotype                                | 400.00      |
| 287 | LAB2108  | Arbovirus Abs (Tick Borne Encephalitis IgG & IgM Abs)    | 400.00      |
| 288 | LAB2109  | Arsenic-Plasma                                           | 350.00      |
| 289 | LAB2110  | Arsenic - Urine                                          | 350.00      |
| 290 | LAB2111  | Arylsulphatase A                                         | 300.00      |
| 291 | LAB2112  | Arylsulphatase A - Urine                                 | 300.00      |
| 292 | LAB2113  | Ascaris Abs IgG                                          | 190.00      |
| 293 | LAB2114  | Ascaris Abs IgG & IgM Westernblot                        | 400.00      |
| 294 | LAB2115  | Ascorbic Acid (Vitamin C)                                | 480.00      |
| 295 | LAB2116  | Asialo GM1 abs IgG & IgM spec.abs                        | 280.00      |
| 296 | LAB2117  | Asialoglycoprotein Receptor Abs                          | 340.00      |
| 297 | LAB2131  | Atenolol (Tenormin)                                      | 310.00      |
| 298 | LAB2134  | Avian Precipitant Abs (15), Specific Abs type IgG)       | 3,780.00    |
| 299 | LAB2136  | Barium                                                   | 680.00      |
| 300 | LAB2139  | Basal Membrane Abs (glomerular & tubular)                | 280.00      |
| 301 | LAB2144  | Beta 2-Glycoprotein Abs                                  | 260.00      |
| 302 | LAB2145  | Beta 2-Microglobulin                                     | 260.00      |
| 303 | LAB2146  | Beta 2-Microglobulin - Urine                             | 260.00      |
| 304 | LAB2148  | Beta Amyloid                                             | 590.00      |
| 305 | LAB2149  | Beta Galactosidase                                       | 160.00      |
| 306 | LAB2152  | Beta Hydroxy -Butyrate                                   | 270.00      |
| 307 | LAB2154  | Bile Acids, Total                                        | 200.00      |
| 308 | LAB2155  | Bile Duct Abs (Canaliculi)                               | 180.00      |
| 309 | LAB2156  | Bile Duct Abs (Epithelium)                               | 180.00      |
| 310 | LAB2158  | Bilirubin Delta- Amniotic Fluid                          | 80.00       |
| 311 | LAB2162  | Biotin (Vitamin H)                                       | 320.00      |
| 312 | LAB2163  | Biotinidase, Quant                                       | 260.00      |
| 313 | LAB2164  | Bismuth - Urine                                          | 680.00      |
| 314 | LAB2166  | Bordetella Pertussis IgA, IgG & IgM Abs (Whooping Cough) | 350.00      |
| 315 | LAB2167  | Borrelia Abs IgG & IgM, Confirmation Westernblot         | 650.00      |
| 316 | LAB2168  | Borrelia DNA (PCR) (Urine or CSF of puncture fluid)      | 1,087.00    |
| 317 | LAB2169  | Borrelia IgG & IgM Abs (Lyme Disease)                    | 550.00      |
| 318 | LAB2170  | Bromide, Quant                                           | 230.00      |
| 319 | LAB2173  | B-type Natriuretic Peptide (BNP)                         | 400.00      |
| 320 | LAB2174  | Buprenorphine - Urine                                    | 780.00      |
| 321 | LAB2176  | Butyryl-Cholinesterase                                   | 80.00       |

Ministry of Health, Qatar (MOH, ACCA)

Director of Finance  
Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

المستشفى الأهلي  
AL-AHLI HOSPITAL

Date: 12-Feb-17

| SR  | CODE    | DESCRIPTION                                  | PRICE (QAR) |
|-----|---------|----------------------------------------------|-------------|
| 322 | LAB2177 | C- Peptide                                   | 350.00      |
| 323 | LAB2179 | C1-esterase Inhibitor (Activity )            | 285.00      |
| 324 | LAB2180 | C1-esterase Inhibitor (Protein)              | 285.00      |
| 325 | LAB2181 | C1q Complement Component                     | 270.00      |
| 326 | LAB2182 | C2 Complement Component                      | 270.00      |
| 327 | LAB2183 | C3 Complement Component                      | 150.00      |
| 328 | LAB2185 | C4 Complement Component                      | 150.00      |
| 329 | LAB2186 | C5 Complement Component                      | 270.00      |
| 330 | LAB2187 | C6 Complement Component                      | 270.00      |
| 331 | LAB2188 | C7 Complement Component                      | 270.00      |
| 332 | LAB2189 | C8 Complement Component                      | 270.00      |
| 333 | LAB2190 | C9 Complement component                      | 270.00      |
| 334 | LAB2194 | Cancer Antigen 50 (CA 50)                    | 360.00      |
| 335 | LAB2195 | Cancer Antigen 54-9 (CA 54-9)                | 400.00      |
| 336 | LAB2196 | Cancer Antigen 72-4 (CA 72-4)                | 400.00      |
| 337 | LAB2197 | Cadmium                                      | 350.00      |
| 338 | LAB2198 | Cadmium - Urine                              | 350.00      |
| 339 | LAB2199 | Caffeine                                     | 340.00      |
| 340 | LAB2200 | Calcitonin                                   | 460.00      |
| 341 | LAB2203 | Calcium Channell Abs (P/Q type)              | 560.00      |
| 342 | LAB2204 | Calprotectin - Faeces                        | 310.00      |
| 343 | LAB2205 | Campylobacter Jejuni & Intestinal Abs        | 240.00      |
| 344 | LAB2206 | Cancer Associated Serum Antigen (CASA)       | 320.00      |
| 345 | LAB2207 | Candida Abs (IgA, IgG,IgM)                   | 480.00      |
| 346 | LAB2211 | Carbamazepine (Tegretol), (Pre or Post)      | 200.00      |
| 347 | LAB2212 | Carbamazepine-Epoxyde                        | 200.00      |
| 348 | LAB2213 | Carbimazol                                   | 720.00      |
| 349 | LAB2214 | Carbohydrate Defficient Transferrin (CDT)    | 360.00      |
| 350 | LAB2215 | Carboxyhaemoglobin                           | 100.00      |
| 351 | LAB2218 | Anti-Cardiolipin Antibodies, IgG & IgM (ACA) | 410.00      |
| 352 | LAB2219 | Carnitine, Free                              | 230.00      |
| 353 | LAB2220 | Carnitine, Free - Sperm                      | 230.00      |
| 354 | LAB2221 | Carnitine, Total                             | 230.00      |
| 355 | LAB2222 | Carnitine, Total - Urine                     | 230.00      |
| 356 | LAB2223 | Carotene                                     | 320.00      |
| 357 | LAB2224 | Cat Scratch Fever (Bartonella IgG+IgM)       | 1,040.00    |
| 358 | LAB2225 | Catecholamines                               | 400.00      |
| 359 | LAB2226 | Catecholamines - Urine 24h                   | 440.00      |
| 360 | LAB2227 | Cathepsin D -Tissue                          | 440.00      |
| 361 | LAB2228 | CCP Abs (RF)                                 | 330.00      |
| 362 | LAB2230 | Centromere Abs                               | 200.00      |
| 363 | LAB2231 | Ceruloplasmin                                | 100.00      |
| 364 | LAB2236 | Chlamydia Trachomatis DNA (NAT) PCR          | 700.00      |
| 365 | LAB2237 | Chlamydia Trachomatis IgA & IgG abs          | 270.00      |
| 366 | LAB2238 | Chloramphenicol                              | 320.00      |
| 367 | LAB2239 | Chlordiazepoxide                             | 310.00      |
| 368 | LAB2243 | Chloroquine                                  | 600.00      |
| 369 | LAB2244 | Chlorpromazine                               | 340.00      |
| 370 | LAB2247 | Cholinesterase (RBC), Acetylcholinoestrage   | 253.00      |
| 371 | LAB2248 | Chromium                                     | 350.00      |
| 372 | LAB2249 | Chromium - Blood                             | 350.00      |
| 373 | LAB2250 | Chromium - Urine                             | 350.00      |

Mustafa El-Ahmed (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE    | DESCRIPTION                                         | PRICE (QAR) |
|-----|---------|-----------------------------------------------------|-------------|
| 374 | LAB2251 | Chromogranin A                                      | 470.00      |
| 375 | LAB2253 | Circulating Immunocomplexes                         | 394.00      |
| 376 | LAB2254 | Citalopram                                          | 320.00      |
| 377 | LAB2255 | Citrate                                             | 160.00      |
| 378 | LAB2256 | Citrate - Sperm                                     | 160.00      |
| 379 | LAB2258 | Clindamycin                                         | 529.00      |
| 380 | LAB2259 | Clobazam / Desmethyloclobazam                       | 630.00      |
| 381 | LAB2260 | Clomethiazole                                       | 340.00      |
| 382 | LAB2261 | Clomipramine / Desmethyloclopramine                 | 440.00      |
| 383 | LAB2262 | Clonazepam (Rivotril)                               | 320.00      |
| 384 | LAB2263 | Coagulation Study (PT, PTT, TT, Factor VIII & IX)   | 580.00      |
| 385 | LAB2264 | Cobalt                                              | 350.00      |
| 386 | LAB2265 | Cobalt - Urine24                                    | 350.00      |
| 387 | LAB2269 | Collagen Abs Profile (Type I -VII)                  | 960.00      |
| 388 | LAB2270 | Colon Epithelium Abs                                | 270.00      |
| 389 | LAB2271 | Comp (Cartilage oligomeric matrix protein)          | 390.00      |
| 390 | LAB2272 | Complex PSA Structure (C-PSA, PSA ratio, Total PSA) | 380.00      |
| 391 | LAB2273 | Coombs Direct, Direct Antiglobulin Test (DAT)       | 75.00       |
| 392 | LAB2275 | Copper                                              | 150.00      |
| 393 | LAB2276 | Copper - Urine 24h                                  | 200.00      |
| 394 | LAB2277 | Copper in Liver Tissue                              | 640.00      |
| 395 | LAB2278 | Cornea Abs.                                         | 160.00      |
| 396 | LAB2280 | Cortisol, Free - Urine 24h                          | 280.00      |
| 397 | LAB2281 | Coxiella Burnetti (Q-Fever)                         | 390.00      |
| 398 | LAB2282 | Coxsackie B1-B6 and A9                              | 1,010.00    |
| 399 | LAB2284 | Creatine                                            | 100.00      |
| 400 | LAB2285 | Creatine - Urine 24h                                | 100.00      |
| 401 | LAB2288 | Creatine Kinase Isoenzymes (CKMM, CKBB, CKMB)       | 300.00      |
| 402 | LAB2293 | Cryptococcal Antigen - CSF                          | 270.00      |
| 403 | LAB2295 | Cryptococcus Antigen - Urine                        | 270.00      |
| 404 | LAB2296 | Cyanide/Thiocyanate (structure)                     | 550.00      |
| 405 | LAB2297 | Cyclic AMP - Urine                                  | 220.00      |
| 406 | LAB2298 | Cyclic AMP (C-AMP), Plasma                          | 220.00      |
| 407 | LAB2299 | Cyclophosphamide                                    | 630.00      |
| 408 | LAB2301 | Cyfra 21-1 (Tumor Marker)                           | 360.00      |
| 409 | LAB2302 | Cystatin C                                          | 180.00      |
| 410 | LAB2303 | Cystic Fibrosis DNA by PCR                          | 5,870.00    |
| 411 | LAB2304 | Cysticercosis Abs (Taenia Abs)                      | 320.00      |
| 412 | LAB2305 | Cysticercosis Abs IgG&IgM Westernblot               | 400.00      |
| 413 | LAB2306 | Cystine - Urine 24                                  | 320.00      |
| 414 | LAB2307 | Cystine, photometric                                | 320.00      |
| 415 | LAB2309 | Cytomegalovirus culture                             | 800.00      |
| 416 | LAB2310 | Cytomegalovirus DNA by PCR                          | 1,087.00    |
| 417 | LAB2311 | Denegue Virus DNA by PCR                            | 1,200.00    |
| 418 | LAB2312 | Dexamethasone                                       | 200.00      |
| 419 | LAB2313 | DHEA-s (Dehydroepiandrosterone Sulphate)            | 360.00      |
| 420 | LAB2314 | Diazepam (Valium)                                   | 630.00      |
| 421 | LAB2315 | Dibenzapine                                         | 320.00      |
| 422 | LAB2316 | Dibucaine Inhibition of Pseudocholinesterase        | 200.00      |
| 423 | LAB2317 | Diclofenac                                          | 320.00      |
| 424 | LAB2320 | Dihydrocodeine                                      | 180.00      |
| 425 | LAB2321 | Dihydrotestosterone                                 | 480.00      |
| 426 | LAB2322 | Dilantin, Phenytonin (Diphenylhydantoin)            | 180.00      |

Musafa El-Ahwal (MBA, FCA, ACCA)

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Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE    | DESCRIPTION                                                       | PRICE (QAR) |
|-----|---------|-------------------------------------------------------------------|-------------|
| 427 | LAB2323 | Diphtheria Abs (Corynebacterium Diphtheria Abs IgG)               | 320.00      |
| 428 | LAB2324 | Disopyramide                                                      | 340.00      |
| 429 | LAB2325 | Diuretic Screen - Urine                                           | 800.00      |
| 430 | LAB2327 | DNA Single Strande Abs                                            | 230.00      |
| 431 | LAB2328 | DNase B (DNase B Abs, Streptococcal)                              | 200.00      |
| 432 | LAB2329 | Dopamine-beta-hydroxylase                                         | 270.00      |
| 433 | LAB2331 | Doxepine/Desmethyldoxepine                                        | 320.00      |
| 434 | LAB2332 | Doxylamine                                                        | 712.00      |
| 435 | LAB2335 | Echinococcus (Hydatid) Antibodies                                 | 300.00      |
| 436 | LAB2337 | Echovirus Abs (Echo 6,7,9,11,30, CF)                              | 1,080.00    |
| 437 | LAB2339 | Ehrlichia Abs IgG & IgM quant                                     | 480.00      |
| 438 | LAB2340 | Elastin Abs                                                       | 270.00      |
| 439 | LAB2341 | ENA Abs - Extractable Nuclear Antigen Abs (Anti RNP & Anti Smith) | 440.00      |
| 440 | LAB2342 | Endomysium IgA abs (Transglutaminase)                             | 250.00      |
| 441 | LAB2343 | Endomysium IgG abs (Transglutaminase)                             | 250.00      |
| 442 | LAB2344 | Endothelium IgG & IgM abs                                         | 270.00      |
| 443 | LAB2345 | Enterovirus (Coxsackie, ECHO-Virus) Abs                           | 180.00      |
| 444 | LAB2346 | Enterovirus culture - CSF                                         | 725.00      |
| 445 | LAB2347 | Enzyme Bilirubin UDPG Transferase -Tissue                         | 1,000.00    |
| 446 | LAB2348 | Ephedrine                                                         | 800.00      |
| 447 | LAB2349 | Ephedrine Screen - Urine                                          | 240.00      |
| 448 | LAB2350 | Epidermal Basal Membrane Abs                                      | 200.00      |
| 449 | LAB2351 | Epstein Barr Virus (EBV) Abs Structure                            | 550.00      |
| 450 | LAB2352 | Epstein Barr Virus (EBV) by immunoblot IgG                        | 1,087.00    |
| 451 | LAB2353 | Epstein Barr Virus (EBV) DNA by PCR                               | 1,087.00    |
| 452 | LAB2354 | Erythropoietin Antibody                                           | 600.00      |
| 453 | LAB2355 | Erythropoietin                                                    | 600.00      |
| 454 | LAB2357 | Estriol (Oestriol), Free (Fetoplacental)                          | 270.00      |
| 455 | LAB2359 | Estrone (Oestrone)                                                | 270.00      |
| 456 | LAB2360 | Ethambutol                                                        | 240.00      |
| 457 | LAB2363 | Ethosuximide                                                      | 140.00      |
| 458 | LAB2365 | Renal Stone Profile                                               | 1,100.00    |
| 459 | LAB2367 | Factor V Mutation Gene (Leiden Mutation)                          | 960.00      |
| 460 | LAB2371 | Factor VIII Multimers                                             | 580.00      |
| 461 | LAB2374 | Factor Xa Activity (Heparin)                                      | 300.00      |
| 462 | LAB2378 | Fatty acids, Nonesterified FFA (Free Fatty Acids)                 | 150.00      |
| 463 | LAB2379 | Felbamate                                                         | 280.00      |
| 464 | LAB2380 | Fentanyl                                                          | 520.00      |
| 465 | LAB2382 | Fetal Erythrocytes                                                | 560.00      |
| 466 | LAB2383 | Fetal Haemoglobin in Erythrocytes (Kleihauer-Betke Test)          | 140.00      |
| 467 | LAB2384 | Fibrillarine Abs                                                  | 340.00      |
| 468 | LAB2387 | Fibronectine (Plasma, Puncture fluid)                             | 270.00      |
| 469 | LAB2388 | Filariosis IgG Abs                                                | 180.00      |
| 470 | LAB2389 | FK506 (Tacrolimus)                                                | 380.00      |
| 471 | LAB2390 | Flecainide (Tambocor)                                             | 320.00      |
| 472 | LAB2391 | Flucytosine                                                       | 320.00      |
| 473 | LAB2392 | Flunitrazepam (Rohypnol)                                          | 310.00      |
| 474 | LAB2393 | Fluoride                                                          | 280.00      |
| 475 | LAB2394 | Fluoride - Urine                                                  | 160.00      |
| 476 | LAB2395 | Fluoxetine/Norfluoxetine                                          | 340.00      |
| 477 | LAB2396 | Flupentixol                                                       | 310.00      |
| 478 | LAB2397 | Fluvoxamine                                                       | 240.00      |

Musafa El-Ahwal (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

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AL-AHLI HOSPITAL

| SR  | CODE    | DESCRIPTION                                                    | PRICE (EGP) |
|-----|---------|----------------------------------------------------------------|-------------|
| 479 | LAB2401 | Formic Acid - Urine                                            | 270.00      |
| 480 | LAB2402 | Free Light Chains Structure                                    | 390.00      |
| 481 | LAB2403 | Fregile X Syndrome (FMR1-Gene)                                 | 2,300.00    |
| 482 | LAB2405 | Fructose - Blood                                               | 270.00      |
| 483 | LAB2407 | Furosemide - Urine                                             | 160.00      |
| 484 | LAB2408 | Furosemide (s)                                                 | 280.00      |
| 485 | LAB2409 | Gabapentin                                                     | 390.00      |
| 486 | LAB2410 | Galactokinase                                                  | 270.00      |
| 487 | LAB2411 | Galactosaemia Screen                                           | 150.00      |
| 488 | LAB2412 | Galactosaemia Screen (blood card)                              | 150.00      |
| 489 | LAB2413 | Galactose                                                      | 320.00      |
| 490 | LAB2414 | Galactose-1-Phosphate                                          | 270.00      |
| 491 | LAB2415 | Galactose-1-Phosphate-Uridyltransferase, Qantitative           | 640.00      |
| 492 | LAB2417 | Ganglioside (GD1a)                                             | 160.00      |
| 493 | LAB2418 | Ganglioside (GD1b)                                             | 160.00      |
| 494 | LAB2419 | Ganglioside Asialo 1 IgG (GA1 IgG)                             | 180.00      |
| 495 | LAB2420 | Ganglioside Asialo 1 IgM (GA1 IgM)                             | 180.00      |
| 496 | LAB2421 | Ganglioside GD1a IgG                                           | 160.00      |
| 497 | LAB2422 | Ganglioside GD1a IgM                                           | 160.00      |
| 498 | LAB2423 | Ganglioside GD1b IgG                                           | 160.00      |
| 499 | LAB2424 | Ganglioside GD1b IgM                                           | 160.00      |
| 500 | LAB2425 | Ganglioside GM1 IgG                                            | 180.00      |
| 501 | LAB2426 | Ganglioside GM1 IgM                                            | 180.00      |
| 502 | LAB2427 | Ganglioside GM2 IgG                                            | 160.00      |
| 503 | LAB2428 | Ganglioside GM2 IgM                                            | 160.00      |
| 504 | LAB2429 | Ganglioside GM3 IgG                                            | 160.00      |
| 505 | LAB2430 | Ganglioside GM3 IgM                                            | 160.00      |
| 506 | LAB2431 | Ganglioside GQ1b IgG & IgM abs                                 | 310.00      |
| 507 | LAB2435 | Gliadine Antibodies (IgA+IgG) (Gluten Abs)                     | 470.00      |
| 508 | LAB2436 | Gliadine IgA specific Abs - Faeces                             | 360.00      |
| 509 | LAB2437 | Glibenclamide                                                  | 360.00      |
| 510 | LAB2438 | Glucagon                                                       | 340.00      |
| 511 | LAB2439 | Parathyroid Antibodies                                         | 320.00      |
| 512 | LAB2443 | Glucosidase, Alpha                                             | 200.00      |
| 513 | LAB2444 | Glucosidase, Beta                                              | 240.00      |
| 514 | LAB2445 | Glucuronidase, Beta                                            | 160.00      |
| 515 | LAB2446 | Glutamate Decarboxylase Abs                                    | 460.00      |
| 516 | LAB2447 | Glutamate Dehydrogenase (GLDH)                                 | 80.00       |
| 517 | LAB2448 | Glutathion                                                     | 390.00      |
| 518 | LAB2449 | Glutathione Reductase                                          | 200.00      |
| 519 | LAB2450 | Glutethimide                                                   | 360.00      |
| 520 | LAB2451 | Glycogen Storage Disease Type 1a (liver biopsy)                | 1,824.00    |
| 521 | LAB2452 | Glycogen Storage Disease (blood, liver, muscle - each)         | 5,460.00    |
| 522 | LAB2454 | Gonococcal Abs                                                 | 200.00      |
| 523 | LAB2455 | Gonococcal DNA (Hybrid Test)                                   | 400.00      |
| 524 | LAB2456 | Goose Feathers (Trival. Antiserum)                             | 220.00      |
| 525 | LAB2462 | Haemoglobin-Haptoglobin Complex/Haemoglobin (Immunological)    | 355.00      |
| 526 | LAB2463 | Haemopexin                                                     | 130.00      |
| 527 | LAB2464 | Haemophilus Influenzae Typ B IgG (Anticapsular Polysacch. Abs) | 240.00      |
| 528 | LAB2465 | Haemosiderin - Urine                                           | 130.00      |
| 529 | LAB2466 | Haloperidol                                                    | 480.00      |
| 530 | LAB2467 | Ham's Test                                                     | 239.00      |
| 531 | LAB2468 | Hanta Virus Abs (IgG & IgM)                                    | 600.00      |

Mustafa El-Ahwal (MBA, FCA, ACCA)

Director of Finance



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE    | DESCRIPTION                                                       | PRICE (QAR) |
|-----|---------|-------------------------------------------------------------------|-------------|
| 532 | LAB2469 | Haptoglobin                                                       | 150.00      |
| 533 | LAB2472 | Heinz Body Stain                                                  | 190.00      |
| 534 | LAB2473 | Helicobacter IgG Immunoblot (IgA & IgG) Confirmatory              | 400.00      |
| 535 | LAB2474 | Helicobacter Pylori Abs (IgA & IgG), Quanti.                      | 300.00      |
| 536 | LAB2475 | Helicobacter Pylori Antigen - Stool                               | 275.00      |
| 537 | LAB2476 | Hemolysins Anti A & Anti B                                        | 180.00      |
| 538 | LAB2477 | Heparin-Induced Thrombocytopenia                                  | 1,700.00    |
| 539 | LAB2481 | Hepatitis A Virus RNA by PCR - Faeces                             | 1,087.00    |
| 540 | LAB2486 | Hepatitis B HBV DNA (liver Tissue)                                | 1,800.00    |
| 541 | LAB2487 | Hepatitis B HBV DNA qualitative                                   | 1,200.00    |
| 542 | LAB2488 | Hepatitis B HBV DNA quantitative                                  | 1,600.00    |
| 543 | LAB2489 | Hepatitis B HBV Genotyping                                        | 1,600.00    |
| 544 | LAB2493 | Hepatitis C Genotype (PCR)                                        | 1,600.00    |
| 545 | LAB2494 | Hepatitis C HCV RNA (liver tissue)                                | 1,800.00    |
| 546 | LAB2495 | Hepatitis C HCV RNA by PCR qual.                                  | 1,200.00    |
| 547 | LAB2496 | Hepatitis C HCV RNA quant. b-DNA                                  | 1,600.00    |
| 548 | LAB2497 | Hepatitis C IgG Abs (Anti-HCV-IgG), Recombinant Immunoblot (RIBA) | 480.00      |
| 549 | LAB2498 | Hepatitis D HDV RNA qualitative, (PCR)                            | 1,200.00    |
| 550 | LAB2499 | Hepatitis Delta Abs                                               | 300.00      |
| 551 | LAB2500 | Hepatitis E Virus Abs                                             | 560.00      |
| 552 | LAB2501 | Herpes Simplex Virus 6 DNA by PCR                                 | 1,200.00    |
| 553 | LAB2502 | Herpes Simplex Virus 6 IgG & IgM                                  | 480.00      |
| 554 | LAB2504 | Herpes Simplex Virus culture                                      | 800.00      |
| 555 | LAB2505 | Herpes Simplex Virus HSV 1&2 DNA by PCR                           | 1,200.00    |
| 556 | LAB2506 | Herpes Simplex Virus type 7 DNA by PCR                            | 1,200.00    |
| 557 | LAB2508 | Hexokinase                                                        | 200.00      |
| 558 | LAB2509 | Hexosaminidase A                                                  | 160.00      |
| 559 | LAB2510 | Hexosaminidase B                                                  | 230.00      |
| 560 | LAB2512 | Hippuric Acid - Urine                                             | 370.00      |
| 561 | LAB2513 | Histamine                                                         | 520.00      |
| 562 | LAB2514 | Histamine - Urine 24                                              | 520.00      |
| 563 | LAB2515 | Histone Antibodies                                                | 520.00      |
| 564 | LAB2517 | Histoplasmosis Abs                                                | 460.00      |
| 565 | LAB2518 | HIV 1 & 2 Antibodies (Western Blot)                               | 500.00      |
| 566 | LAB2520 | HIV 1, P24 Antigen (Western Blot)                                 | 640.00      |
| 567 | LAB2521 | HIV Genotyping/Resistance                                         | 4,700.00    |
| 568 | LAB2522 | HIV Ultrasensitive quant. PCR b-DNA                               | 1,600.00    |
| 569 | LAB2523 | HLA Abs (Cytotoxic Test with Lymphocytes)                         | 600.00      |
| 570 | LAB2524 | HLA B27 (Including Confirmation)                                  | 480.00      |
| 571 | LAB2525 | HLA full typing (A,B,C, DQ & DR), Class I & II                    | 3,600.00    |
| 572 | LAB2526 | HLA typing (A,B & C), Class I                                     | 2,400.00    |
| 573 | LAB2527 | HLA typing (DR + DQ) by PCR (Class II)                            | 1,200.00    |
| 574 | LAB2528 | Homocysteine (Quantitative)                                       | 350.00      |
| 575 | LAB2529 | Homogentisic acid - Urine 24h                                     | 200.00      |
| 576 | LAB2530 | Homovanillic Acid (HVA) -Urine 24h                                | 180.00      |
| 577 | LAB2531 | Hormone receptors (frozen tissue)                                 | 653.00      |
| 578 | LAB2532 | Hormone receptors (paraffin block)                                | 1,210.00    |
| 579 | LAB2533 | HTLV 1/2 (Human T. Lymphotropic Virus )                           | 600.00      |
| 580 | LAB2534 | Human Anti-Mouse Abs                                              | 520.00      |
| 581 | LAB2535 | Human Growth Hormone (Somatotropin) (hGH)                         | 260.00      |
| 582 | LAB2536 | Hyaluronidase (Anti Streptococcal Hyaluronidase) (ASH)            | 100.00      |
| 583 | LAB2537 | Hydroxyproline Total                                              | 140.00      |

Mustafa El-Ahmed  
Director of Finance  
Al-Ahli Hospital



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AL-AHLI HOSPITAL

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| SR  | CODE    | DESCRIPTION                                                       | PRICE (QAR) |
|-----|---------|-------------------------------------------------------------------|-------------|
| 584 | LAB2538 | Hypothalamus Abs                                                  | 200.00      |
| 585 | LAB2542 | Imipramine / Desipramine                                          | 640.00      |
| 586 | LAB2543 | Immune Reactive Trypsin                                           | 230.00      |
| 587 | LAB2544 | Immune-Complexes see circulating Immune Complexes                 | 394.00      |
| 588 | LAB2545 | Immunoelectrophoresis (immunofixation) IgA, IgG & IgM - Serum     | 390.00      |
| 589 | LAB2546 | Immunoelectrophoresis (immunofixation) IgA, IgG & IgM - Urine 24h | 400.00      |
| 590 | LAB2548 | Immunoglobulin Ig D, quant.                                       | 150.00      |
| 591 | LAB2550 | Immunoglobulin IgA Secretor Abs - Saliva                          | 300.00      |
| 592 | LAB2551 | Immunoglobulin IgE quant                                          | 200.00      |
| 593 | LAB2553 | Immunoglobulin IgG subclasses 1-4 Serum                           | 810.00      |
| 594 | LAB2555 | Immunoglobulin IgM quant.- CSF                                    | 150.00      |
| 595 | LAB2557 | Influenza A, Ab serum                                             | 120.00      |
| 596 | LAB2558 | Influenza B, Ab serum                                             | 120.00      |
| 597 | LAB2560 | Inhibin B                                                         | 550.00      |
| 598 | LAB2561 | Inner Ear Abs                                                     | 200.00      |
| 599 | LAB2563 | Insulin Abs (human), Autoantibodies                               | 180.00      |
| 600 | LAB2564 | Insulin Abs (porcine) IgG                                         | 230.00      |
| 601 | LAB2565 | Insulin Receptor Abs IgG                                          | 740.00      |
| 602 | LAB2566 | Insulin-like-growth factor binding protein 3 (IGFBP-3))           | 560.00      |
| 603 | LAB2567 | Interleukin 1 Beta                                                | 640.00      |
| 604 | LAB2568 | Interleukin 6 (IL6)                                               | 640.00      |
| 605 | LAB2569 | Interleukin II                                                    | 640.00      |
| 606 | LAB2570 | Interleukin II - Receptor (IL2R) soluble                          | 470.00      |
| 607 | LAB2571 | Intrinsic Factor Abs                                              | 270.00      |
| 608 | LAB2572 | Iodine (Protein bound), Total                                     | 270.00      |
| 609 | LAB2573 | Iron (Desferal test) - Urine 6h                                   | 160.00      |
| 610 | LAB2576 | Iron in Liver Tissue                                              | 582.00      |
| 611 | LAB2578 | Islet Cell Abs, Qual & Quant (Pancreatic Cells)                   | 240.00      |
| 612 | LAB2579 | Islet Cell Antigen-2 Abs                                          | 200.00      |
| 613 | LAB2580 | Islet Cell Surface Abs (ICSA)                                     | 160.00      |
| 614 | LAB2581 | Isoagglutinins AI, A2, & B                                        | 330.00      |
| 615 | LAB2582 | Isoamylase (Alpha Amylase Isoenzyme)                              | 180.00      |
| 616 | LAB2583 | Kell Antigen                                                      | 100.00      |
| 617 | LAB2584 | KU Autoantibodies                                                 | 200.00      |
| 618 | LAB2586 | Lacrimal Gland Abs                                                | 270.00      |
| 619 | LAB2588 | Lactate Dehydrogenase (LDH) Isoenzymes                            | 297.00      |
| 620 | LAB2589 | Lactic Acid - CSF                                                 | 100.00      |
| 621 | LAB2591 | Lamotrigin                                                        | 280.00      |
| 622 | LAB2594 | Laxative Screening                                                | 640.00      |
| 623 | LAB2595 | Lead, Serum                                                       | 260.00      |
| 624 | LAB2596 | Lead - Urine 24h                                                  | 270.00      |
| 625 | LAB2597 | Lead (hair)                                                       | 300.00      |
| 626 | LAB2598 | Legionella Pneumophila PCR                                        | 1,087.00    |
| 627 | LAB2599 | Legionella Pneumophila Abs                                        | 800.00      |
| 628 | LAB2600 | Legionella Pneumophila Antigen - Urine                            | 250.00      |
| 629 | LAB2601 | Leishmania Antibody                                               | 200.00      |
| 630 | LAB2602 | Leptin                                                            | 360.00      |
| 631 | LAB2603 | Leptospira Abs                                                    | 510.00      |
| 632 | LAB2604 | Leucocyte Abs                                                     | 1,000.00    |
| 633 | LAB2605 | Levetiracetam                                                     | 300.00      |
| 634 | LAB2606 | Levomopromazine                                                   | 240.00      |
| 635 | LAB2607 | Lidocaine                                                         | 270.00      |

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| SR  | CODE    | DESCRIPTION                                           | PRICE (QAR) |
|-----|---------|-------------------------------------------------------|-------------|
| 636 | LAB2609 | Lipids, Total (Lipidogram) - Faeces                   | 220.00      |
| 637 | LAB2610 | Lipoprotein A (Lpa)                                   | 220.00      |
| 638 | LAB2611 | Lipoprotein X                                         | 130.00      |
| 639 | LAB2612 | Listeria Abs                                          | 270.00      |
| 640 | LAB2613 | Listeria DNA by PCR - CSF                             | 1,087.00    |
| 641 | LAB2614 | Lithium                                               | 120.00      |
| 642 | LAB2615 | Liver Cytosol 1 IgG Specific Abs (LC1)                | 250.00      |
| 643 | LAB2616 | Liver Kidney Microsomal Abs                           | 400.00      |
| 644 | LAB2617 | Liver Membrane Abs                                    | 280.00      |
| 645 | LAB2618 | Liver Specific Protein Abs                            | 260.00      |
| 646 | LAB2619 | Lorazepam                                             | 310.00      |
| 647 | LAB2621 | LSD (Lysergic Acid Diethylamide) - Urine              | 280.00      |
| 648 | LAB2622 | Lupus Anticoagulant                                   | 560.00      |
| 649 | LAB2624 | Lymphocyte Chorionic Meningitis IgM (LCM)             | 320.00      |
| 650 | LAB2625 | Lymphocyte Chorionic Meningitis Virus IgG & IgM - CSF | 350.00      |
| 651 | LAB2626 | Lysosomal Enzymes                                     | 389.00      |
| 652 | LAB2627 | Lysozyme - CSF                                        | 100.00      |
| 653 | LAB2628 | M2-PK (Tumour Marker)                                 | 380.00      |
| 654 | LAB2629 | Macro Creatinine Kinase types 1 & 2                   | 480.00      |
| 655 | LAB2632 | Malondialdehyde                                       | 360.00      |
| 656 | LAB2633 | Manganese                                             | 350.00      |
| 657 | LAB2634 | Mannosidase, Alpha                                    | 160.00      |
| 658 | LAB2635 | Mannosidase, Beta                                     | 160.00      |
| 659 | LAB2636 | Maprotiline & Desmethyloprotiline                     | 582.00      |
| 660 | LAB2638 | Medullary Myelin Protein Abs                          | 160.00      |
| 661 | LAB2639 | Melatonin                                             | 320.00      |
| 662 | LAB2640 | Meningitis Screen                                     | 300.00      |
| 663 | LAB2641 | Mephentoin                                            | 270.00      |
| 664 | LAB2642 | Mercury, Blood                                        | 350.00      |
| 665 | LAB2643 | Mercury - Breast Milk                                 | 350.00      |
| 666 | LAB2644 | Mercury - Hair                                        | 350.00      |
| 667 | LAB2645 | Mercury - Urine                                       | 350.00      |
| 668 | LAB2646 | Metanephrine & Normetanephrine, Plasma or 24h Urine   | 500.00      |
| 669 | LAB2649 | Methotrexate                                          | 320.00      |
| 670 | LAB2650 | Methylhippuric Acid - Urine                           | 340.00      |
| 671 | LAB2651 | Methylmalonic Acid                                    | 500.00      |
| 672 | LAB2652 | Mexitil                                               | 320.00      |
| 673 | LAB2653 | Mianserine                                            | 220.00      |
| 674 | LAB2655 | Micropolyspora Abs                                    | 270.00      |
| 675 | LAB2656 | Mirtazapine Structure                                 | 280.00      |
| 676 | LAB2659 | Mitochondrial Abs subtype 8 (AMA)                     | 250.00      |
| 677 | LAB2660 | Mitochondrial Abs subtype M2 (AMA)                    | 250.00      |
| 678 | LAB2661 | Mitochondrial Abs subtypes M 1-9, IgG & IgM (AMAK)    | 1,680.00    |
| 679 | LAB2662 | Molybdenum                                            | 350.00      |
| 680 | LAB2663 | Molybdenum - Urine                                    | 350.00      |
| 681 | LAB2666 | Mouth Mucosa Abs                                      | 240.00      |
| 682 | LAB2667 | Mucopolysaccharides - Urine                           | 400.00      |
| 683 | LAB2668 | Mumps Culture                                         | 800.00      |
| 684 | LAB2669 | Muscle and/or Nerve Biopsy (each)                     | 3,000.00    |
| 685 | LAB2670 | Mycophenolic acid                                     | 240.00      |
| 686 | LAB2673 | Mycoplasma Pneumoniae IgM Specific Abs                | 230.00      |
| 687 | LAB2674 | Myelin Oligodendrocyte Glycoprotein Abs               | 330.00      |

Director of Finance

Al-Ahli Hospital





# AL-AHLI HOSPITAL PRICE LIST

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AL-AHLI HOSPITAL

Date: 12-Feb-17

| SR  | CODE    | DESCRIPTION                                                    | PRICE (QAR) |
|-----|---------|----------------------------------------------------------------|-------------|
| 688 | LAB2675 | Myelin Associated Glycoprotein Abs (MAG) (IgA, IgG, IgM spec.) | 340.00      |
| 689 | LAB2676 | Myelin Basic Protein Abs                                       | 330.00      |
| 690 | LAB2677 | Myeloperoxidase (MPO) Abs                                      | 320.00      |
| 691 | LAB2679 | Myocardial Abs                                                 | 180.00      |
| 692 | LAB2680 | Myoglobin, Quant.                                              | 230.00      |
| 693 | LAB2681 | Myoglobin, Quant. - Urine                                      | 230.00      |
| 694 | LAB2682 | Myolemm Abs                                                    | 230.00      |
| 695 | LAB2683 | N-Acetyl-Glucosaminidase & Creatinine                          | 320.00      |
| 696 | LAB2684 | N-Desmethylnesuximide                                          | 200.00      |
| 697 | LAB2685 | Neonatal Metabolic Screen (Card) (TSH / PKU / Galactose)       | 400.00      |
| 698 | LAB2686 | Neopterin                                                      | 710.00      |
| 699 | LAB2687 | Netilmicin (Pre & Post)                                        | 640.00      |
| 700 | LAB2688 | Neuroendothelial Abs                                           | 143.00      |
| 701 | LAB2689 | Neurone Specific Enolase (NSE)                                 | 400.00      |
| 702 | LAB2691 | Nickel                                                         | 350.00      |
| 703 | LAB2692 | Nickel - Urine                                                 | 350.00      |
| 704 | LAB2693 | Nicotinamide (Niacin, Vitamin PP)                              | 260.00      |
| 705 | LAB2694 | Nicotine, Serum                                                | 450.00      |
| 706 | LAB2695 | Nicotine - Urine                                               | 450.00      |
| 707 | LAB2696 | Nitrazepam (Mogadan)                                           | 310.00      |
| 708 | LAB2697 | Nortriptyline                                                  | 270.00      |
| 709 | LAB2698 | Norwalk Virus Antigen Genotype 1 & 2 - Faeces                  | 470.00      |
| 710 | LAB2700 | Nuclear Matrix Protein 22 (NMP22), Urinary Bladder tissue Ag   | 470.00      |
| 711 | LAB2701 | Oestrogen & Progesterone receptors - Tissue                    | 653.00      |
| 712 | LAB2702 | Oestrogen & Progesterone receptors (Parafin Block)             | 1,210.00    |
| 713 | LAB2703 | Olanzapine                                                     | 360.00      |
| 714 | LAB2704 | Oligoclonal Band CSF                                           | 450.00      |
| 715 | LAB2705 | Oligosaccharides - Urine                                       | 450.00      |
| 716 | LAB2708 | Opipramol                                                      | 350.00      |
| 717 | LAB2709 | Organic Acid Screen - Urine                                    | 940.00      |
| 718 | LAB2713 | Osteoporosis Screen - Urine                                    | 700.00      |
| 719 | LAB2714 | Ovarian Autoantibodies                                         | 160.00      |
| 720 | LAB2715 | Oxalate - Urine 24h                                            | 220.00      |
| 721 | LAB2716 | Oxazepam                                                       | 310.00      |
| 722 | LAB2717 | Oxcarbazepine structure                                        | 490.00      |
| 723 | LAB2718 | P53 Abs (Tumor Protein)                                        | 320.00      |
| 724 | LAB2720 | Pancreatic Duct Epithelial Abs                                 | 270.00      |
| 725 | LAB2721 | Pancreatic Elastase                                            | 360.00      |
| 726 | LAB2722 | Pancreatic Elastase - Faeces                                   | 360.00      |
| 727 | LAB2723 | Pancreatic Lipase                                              | 130.00      |
| 728 | LAB2724 | Pancreatic Polypeptide                                         | 600.00      |
| 729 | LAB2725 | PAP Smear - Cervical Smear (LBC)                               | 320.00      |
| 730 | LAB2726 | Papilloma Virus DNA (HPV-DNA)                                  | 820.00      |
| 731 | LAB2727 | Paragonimus Abs.                                               | 200.00      |
| 732 | LAB2728 | Parainfluenza Virus Abs, Type 1, 2 & 3                         | 360.00      |
| 733 | LAB2729 | Parathormone Related Peptide                                   | 580.00      |
| 734 | LAB2730 | Intact Parathyroid Hormone                                     | 350.00      |
| 735 | LAB2731 | Parathyroid Tissue Abs                                         | 350.00      |
| 736 | LAB2733 | Parotis Canaliculi & Acini Abs                                 | 270.00      |
| 737 | LAB2734 | Parvovirus B-19 Abs, IgG & IgM                                 | 540.00      |
| 738 | LAB2735 | Parvovirus PCR                                                 | 1,200.00    |
| 739 | LAB2736 | Parvovirus PCR - CSF                                           | 1,200.00    |
| 740 | LAB2737 | Parvovirus B-19 Abs Immunoblot IgG                             | 400.00      |

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|-----|---------|---------------------------------------------------------|-------------|
| 741 | LAB2738 | Parvovirus Virus B 19 Abs Immunoblot IgM                | 400.00      |
| 742 | LAB2739 | Pentachlorophenol                                       | 360.00      |
| 743 | LAB2740 | Perazine                                                | 240.00      |
| 744 | LAB2741 | Peroxide Stain                                          | 510.00      |
| 745 | LAB2742 | Perphenazine                                            | 550.00      |
| 746 | LAB2745 | Phenol - Urine                                          | 340.00      |
| 747 | LAB2746 | Phenylbutazone                                          | 270.00      |
| 748 | LAB2750 | Phytanic acid                                           | 800.00      |
| 749 | LAB2751 | Pimozide                                                | 520.00      |
| 750 | LAB2752 | Pipamperone                                             | 270.00      |
| 751 | LAB2753 | Pituitary Abs                                           | 200.00      |
| 752 | LAB2754 | PKU Screen (blood card)                                 | 150.00      |
| 753 | LAB2755 | Placental Alkaline Phosphatase                          | 360.00      |
| 754 | LAB2757 | Plasminogen Activator Inhibitor (ELISA)                 | 520.00      |
| 755 | LAB2758 | Platelets Abs (Bound & Free)                            | 3,370.00    |
| 756 | LAB2759 | PMSCL Abs (PM 1 Abs) (Polymyositis Abs)                 | 270.00      |
| 757 | LAB2760 | Pneumococcal Vacc Antigen IgG specific Abs              | 300.00      |
| 758 | LAB2762 | Polio Virus 1, 2 + 3 Abs                                | 540.00      |
| 759 | LAB2763 | Polyoma Detection (PCR) - CSF                           | 1,087.00    |
| 760 | LAB2764 | Porphobilinogen Quant. - Urine 24h                      | 163.00      |
| 761 | LAB2765 | Porphyrins - Faeces                                     | 1,082.00    |
| 762 | LAB2766 | Porphyrins - Urine 24h                                  | 860.00      |
| 763 | LAB2767 | Porphyrins in Erythrocytes, Total                       | 330.00      |
| 764 | LAB2769 | Potassium (RBC)                                         | 100.00      |
| 765 | LAB2770 | Potassium - Faeces                                      | 100.00      |
| 766 | LAB2774 | Pregnandiol - Urine 24h                                 | 235.00      |
| 767 | LAB2775 | Pregnanetroil - Urine 24h                               | 200.00      |
| 768 | LAB2776 | Pregnantriolone - Urine 24h                             | 259.00      |
| 769 | LAB2777 | Prickle Cell Desmosomes Abs                             | 200.00      |
| 770 | LAB2778 | Primidone                                               | 320.00      |
| 771 | LAB2779 | Pro Insulin                                             | 280.00      |
| 772 | LAB2780 | Procainamide/N-acetylprocainamide (NAPA)                | 550.00      |
| 773 | LAB2781 | Procalcitonin (PCT)                                     | 510.00      |
| 774 | LAB2782 | Procollagen III Peptide (P-III-P)                       | 340.00      |
| 775 | LAB2785 | Triple Test (Second Trimester, Downs Risk)              | 660.00      |
| 776 | LAB2793 | BIO Profile 6 Anorexia Nervosa                          | 900.00      |
| 777 | LAB2794 | BIO Profile 7 Pituitary Insufficiency (Male)            | 1,100.00    |
| 778 | LAB2795 | BIO Profile 8 Pituitary insufficiency (Female)          | 1,100.00    |
| 779 | LAB2796 | BIO Profile 9 Adrenal Genital Syndrome                  | 900.00      |
| 780 | LAB2805 | Promazine                                               | 270.00      |
| 781 | LAB2806 | Prometazine                                             | 240.00      |
| 782 | LAB2807 | Propafenone                                             | 320.00      |
| 783 | LAB2808 | Propanalol                                              | 200.00      |
| 784 | LAB2809 | Propylphenazone                                         | 270.00      |
| 785 | LAB2813 | Prostatic Acid Phosphatase (PAP Immunoassay)            | 210.00      |
| 786 | LAB2816 | Protein Electrophoresis (Proteinuria Structure) - Urine | 710.00      |
| 787 | LAB2818 | Protein S-100                                           | 390.00      |
| 788 | LAB2823 | Proteinase 3 Abs (PR3) IgG                              | 380.00      |
| 789 | LAB2825 | Prothrombin Fragment 1+2 (F1+2)                         | 360.00      |
| 790 | LAB2827 | Protriptyline                                           | 270.00      |
| 791 | LAB2829 | Purkinje Cells (Anti YO)                                | 200.00      |
| 792 | LAB2830 | Pyridinoline (Structure) - Urine 24h                    | 540.00      |

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Al-Ahli Hospital



المستشفى الأهلي  
AL-AHLI HOSPITAL

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| SR  | CODE     | DESCRIPTION                                                | PRICE (QAR) |
|-----|----------|------------------------------------------------------------|-------------|
| 793 | LAB2831  | Pyrimethamine                                              | 280.00      |
| 794 | LAB2832  | Pyruvate                                                   | 110.00      |
| 795 | LAB28325 | Semen Analysis                                             | 200.00      |
| 796 | LAB2833  | Pyruvate - CSF                                             | 110.00      |
| 797 | LAB2834  | Pyruvate Kinase (PK)                                       | 110.00      |
| 798 | LAB2835  | Q Fever (Coxiella Burnetti) Abs                            | 440.00      |
| 799 | LAB2836  | Quetiapine                                                 | 470.00      |
| 800 | LAB2837  | Quinidine                                                  | 355.00      |
| 801 | LAB2838  | Quinine                                                    | 220.00      |
| 802 | LAB2839  | RA-33 Abs (hnRNP A2 Protein)                               | 400.00      |
| 803 | LAB2841  | RANA Abs (Rheumatoid Arthritis Associated Nuclear Antigen) | 480.00      |
| 804 | LAB2842  | RAST (each or per Mix)                                     | 150.00      |
| 805 | LAB2843  | Reboxetine                                                 | 400.00      |
| 806 | LAB2844  | Recoverin Abs                                              | 240.00      |
| 807 | LAB2845  | Reducing Substances (Kerry Test) - Faeces                  | 360.00      |
| 808 | LAB2847  | Renin, Active                                              | 330.00      |
| 809 | LAB2848  | Respiratory Syncytial Virus Abs (RSV-Abs), Serum           | 150.00      |
| 810 | LAB2849  | Reticulin Abs, IgA & IgG                                   | 270.00      |
| 811 | LAB2850  | Retinol Binding Protein                                    | 239.00      |
| 812 | LAB2851  | Rheumatoid Factor IgA, IgG & IgM                           | 550.00      |
| 813 | LAB2853  | Ribonuclease                                               | 270.00      |
| 814 | LAB2854  | Ribosomal Abs                                              | 350.00      |
| 815 | LAB2855  | Rickettsia Abs Structure (R. Conori, R. Mooseri/Typhi)     | 660.00      |
| 816 | LAB2856  | Rifabutin                                                  | 320.00      |
| 817 | LAB2857  | Rifampicin                                                 | 320.00      |
| 818 | LAB2858  | Ritalin (Ritalinic Acid & Methylphenidate)                 | 330.00      |
| 819 | LAB2859  | RNP Abs (Extractable Nuclear Antigen Abs)                  | 440.00      |
| 820 | LAB2866  | Saccharomyces IgA, IgG, IgM Abs Structure                  | 310.00      |
| 821 | LAB2870  | Salivary Gland Abs (Parotis Canaliculi Abs)                | 270.00      |
| 822 | LAB2872  | Sandfly Fever Virus Abs, IgG & IgM                         | 800.00      |
| 823 | LAB2873  | Sarcolemm Abs.                                             | 230.00      |
| 824 | LAB2874  | SCC (Squamous Cell Carcinoma)                              | 380.00      |
| 825 | LAB2876  | Selenium                                                   | 350.00      |
| 826 | LAB2877  | Selenium - Urine 24h                                       | 350.00      |
| 827 | LAB2878  | Serotonin                                                  | 230.00      |
| 828 | LAB2879  | Serotonin Abs                                              | 320.00      |
| 829 | LAB2880  | Sertraline                                                 | 200.00      |
| 830 | LAB2881  | Sex Hormone Binding Globulin (SHBG)                        | 360.00      |
| 831 | LAB2882  | Shigella Sonnei Abs                                        | 270.00      |
| 832 | LAB2883  | Sialic acid                                                | 260.00      |
| 833 | LAB2884  | Signal Recognition Particle Abs                            | 400.00      |
| 834 | LAB2885  | Silver                                                     | 511.00      |
| 835 | LAB2886  | Silver - Urine                                             | 511.00      |
| 836 | LAB2887  | Sirolimus                                                  | 510.00      |
| 837 | LAB2888  | Skeletal/Striated Muscle Abs                               | 170.00      |
| 838 | LAB2889  | Smith (SM) Abs (Extractable Nuclear Antigen Abs)           | 220.00      |
| 839 | LAB28903 | Streptococcus Group A Rapid Qualitative Test (Screen)      | 110.00      |
| 840 | LAB2892  | Sodium - Faeces                                            | 100.00      |
| 841 | LAB2894  | Soluble Liver Antigen Abs                                  | 260.00      |
| 842 | LAB2895  | Soluble Transferrin Receptor                               | 180.00      |
| 843 | LAB2896  | Somatomedin C (Insulin Growth Factor-1, IGF-1)             | 600.00      |
| 844 | LAB2899  | Anti-Sperm Abs (ASA), Serum                                | 600.00      |
| 845 | LAB2900  | SSA and SSB Abs (anti-RO/anti LA)                          | 500.00      |

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| SR  | CODE    | DESCRIPTION                                              | PRICE (QAR) |
|-----|---------|----------------------------------------------------------|-------------|
| 846 | LAB2901 | Staphyloisn Abs                                          | 70.00       |
| 847 | LAB2902 | Stone analysis, Qual. (kidney or urine)                  | 250.00      |
| 848 | LAB2903 | Stratum Spinosum (spiny cell) Abs                        | 270.00      |
| 849 | LAB2904 | Streptokinase Abs                                        | 110.00      |
| 850 | LAB2914 | TB Culture C/S                                           | 350.00      |
| 851 | LAB2915 | TB Culture with prelim. AFB Smear -Bronchial Washing     | 380.00      |
| 852 | LAB2916 | TB Culture with prelim. AFB staining - Sputum            | 380.00      |
| 853 | LAB2917 | TB Culture with prelim. AFB staining & PCR -CSF          | 1,610.00    |
| 854 | LAB2918 | TB Culture without AFB Staining - Gastric Fluid          | 350.00      |
| 855 | LAB2919 | TB Culture without AFB staining -Urine                   | 350.00      |
| 856 | LAB2920 | TB PCR - Bronchial Washing                               | 1,200.00    |
| 857 | LAB2921 | TB PCR - CSF, Sputum, Urine, Pus, Body Fluids            | 1,200.00    |
| 858 | LAB2925 | Telcoplanine                                             | 360.00      |
| 859 | LAB2926 | Testosterone, Free                                       | 360.00      |
| 860 | LAB2928 | Tetanus Toxoid Abs                                       | 270.00      |
| 861 | LAB2929 | Tetrahydroaldosterone - Urine 24h                        | 600.00      |
| 862 | LAB2930 | Tetrahydrocortisol -Urine 24h                            | 520.00      |
| 863 | LAB2931 | Thallium                                                 | 350.00      |
| 864 | LAB2932 | Theophylline                                             | 320.00      |
| 865 | LAB2933 | Thiopental Structure                                     | 320.00      |
| 866 | LAB2934 | Thioridazine serum                                       | 340.00      |
| 867 | LAB2936 | Thrombin-Antithrombin Complex (TAT)                      | 230.00      |
| 868 | LAB2937 | Thymidine Kinase                                         | 800.00      |
| 869 | LAB2938 | Thymus Abs (IgA, IgG & IgM)                              | 270.00      |
| 870 | LAB2939 | Thyroglobulin                                            | 290.00      |
| 871 | LAB2940 | Apt test                                                 | 80.00       |
| 872 | LAB2942 | Thyroid Colloid Abs                                      | 270.00      |
| 873 | LAB2945 | Thyroid Stimulating Immunoglobulin see TSH Receptors Abs | 390.00      |
| 874 | LAB2946 | Thyroxine Binding Globulin                               | 200.00      |
| 875 | LAB2949 | Tick Borne Encephalitis IgG & IgM Abs                    | 400.00      |
| 876 | LAB2950 | Tick Borne Encephalitis RNA by (PCR) - CSF               | 1,087.00    |
| 877 | LAB2951 | Tissue Plasminogen Activator (t-PA)                      | 200.00      |
| 878 | LAB2954 | Tocainide                                                | 270.00      |
| 879 | LAB2955 | Topiramate (Topamax)                                     | 600.00      |
| 880 | LAB2957 | Total Antioxidative Capacity                             | 510.00      |
| 881 | LAB2958 | Total Complement Activity (CH100/CH50)                   | 260.00      |
| 882 | LAB2959 | Toxocara Canis Abs & IgM Westernblot                     | 800.00      |
| 883 | LAB2961 | Toxoplasma Gondii Antigen PCR by PCR                     | 1,200.00    |
| 884 | LAB2962 | Tramadol                                                 | 320.00      |
| 885 | LAB2964 | Transketolase                                            | 350.00      |
| 886 | LAB2965 | TRAP 5b (Tartrate Resistent Acid Phosphatase 5b)         | 400.00      |
| 887 | LAB2966 | Trazodone                                                | 310.00      |
| 888 | LAB2970 | Treponemal IgM Abs (Immunoblot)                          | 400.00      |
| 889 | LAB2971 | Trichinosis Abs IgG & IgM Westernblot                    | 400.00      |
| 890 | LAB2972 | Trichinosis Abs IgG (EIT)                                | 120.00      |
| 891 | LAB2974 | Triiodothyronine (T3) Abs                                | 270.00      |
| 892 | LAB2977 | Trimipramine                                             | 280.00      |
| 893 | LAB2978 | Tropheryma Whippelii DNA - CSF                           | 1,087.00    |
| 894 | LAB2980 | Trypanosomoa-Brucei Abs (Sleep Disease)                  | 540.00      |
| 895 | LAB2981 | Trypanosomoa-Crucei Abs (Chagas)                         | 540.00      |
| 896 | LAB2982 | Trypsin                                                  | 230.00      |
| 897 | LAB2983 | Tryptase                                                 | 360.00      |
| 898 | LAB2986 | TSH Receptor Abs                                         | 420.00      |

MUSTAFA AL-AHLI (MBA, FCA, ACCA)  
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| SR  | CODE     | DESCRIPTION                                                       | PRICE (QAR) |
|-----|----------|-------------------------------------------------------------------|-------------|
| 899 | LAB2988  | Tularaemia IgG & IgM Abs (Francisella Tularensis)                 | 270.00      |
| 900 | LAB2989  | Tumour Necrosis factor TNF                                        | 440.00      |
| 901 | LAB2990  | U1-nRNP Abs (U1-Nuclea Ribonuclear Protein Abs)                   | 200.00      |
| 902 | LAB2995  | Urobilinogen - Faces                                              | 140.00      |
| 903 | LAB2996  | Uroporphyrinogen-I-synthase                                       | 320.00      |
| 904 | LAB2997  | Valium (Diazepam)-serum                                           | 550.00      |
| 905 | LAB2999  | Vanadium                                                          | 320.00      |
| 906 | LAB3000  | Vancomycin Assay (Pre & Post)                                     | 430.00      |
| 907 | LAB3001  | Vanillylmandelic Acid (VMA) - Urine                               | 200.00      |
| 908 | LAB3002  | Varicella Zoster Virus Abs (IgG & IgM)                            | 500.00      |
| 909 | LAB3003  | Varicella Zoster Virus DNA (PCR) - CSF                            | 1,087.00    |
| 910 | LAB3004  | Vascular Abs                                                      | 270.00      |
| 911 | LAB3005  | Venlafaxine/Desmethyl-Venlafaxine                                 | 320.00      |
| 912 | LAB30057 | Fibrinogen Degradation Products, D-Dimer                          | 150.00      |
| 913 | LAB3006  | Verapamil                                                         | 640.00      |
| 914 | LAB3007  | Verl Long Chain Fatty Acids (VLCFA)                               | 1,300.00    |
| 915 | LAB3009  | Vigabatrin (Sabril)                                               | 390.00      |
| 916 | LAB3010  | Viscosity, Plasma                                                 | 270.00      |
| 917 | LAB3011  | Vitamin A (Retinol)                                               | 270.00      |
| 918 | LAB30113 | Protein C                                                         | 250.00      |
| 919 | LAB30114 | Protein S                                                         | 330.00      |
| 920 | LAB3012  | Vitamin B1 (Thiamine)                                             | 270.00      |
| 921 | LAB30130 | Fibrinogen                                                        | 100.00      |
| 922 | LAB3014  | Vitamin B2 (Riboflavin)                                           | 290.00      |
| 923 | LAB3015  | Vitamin B6 (Pyridoxal)                                            | 390.00      |
| 924 | LAB3016  | Vitamin C                                                         | 400.00      |
| 925 | LAB3017  | Vitamin D (1,25 Dihydroxycholecalciferol)                         | 680.00      |
| 926 | LAB3018  | Vitamin D (25-Hydroxy-Cholecalciferol)                            | 390.00      |
| 927 | LAB3019  | Vitamin E (Alpha Tocopherol)                                      | 270.00      |
| 928 | LAB30190 | Plasminogen                                                       | 180.00      |
| 929 | LAB3020  | Vitamin H (Biotin)                                                | 320.00      |
| 930 | LAB3021  | Vitamin K 1                                                       | 400.00      |
| 931 | LAB30215 | Prothrombin Time (PT)                                             | 100.00      |
| 932 | LAB3022  | Warfarin                                                          | 380.00      |
| 933 | LAB30224 | Prothrombin Time/International Normalized Ratio (PT/INR)          | 100.00      |
| 934 | LAB3023  | Anti-Neutrophil Cytoplasmic Antibody (ANCA) C&P                   | 400.00      |
| 935 | LAB30235 | Partial Thromboplastin Time (APTT)                                | 120.00      |
| 936 | LAB3025  | Xanthurenic Acid - Urine 24h                                      | 560.00      |
| 937 | LAB3026  | Xylose Tolerance test, 1h, 2h                                     | 100.00      |
| 938 | LAB30260 | Thrombin Time (TT)                                                | 120.00      |
| 939 | LAB30271 | Respiratory Syncytial Virus Ag (RSV-Ag), Nasopharyngeal Secretion | 150.00      |
| 940 | LAB3030  | Zinc                                                              | 235.00      |
| 941 | LAB3031  | Zinc in Erythrocytes                                              | 350.00      |
| 942 | LAB3032  | Zolpidem                                                          | 220.00      |
| 943 | LAB3033  | Random urine Albumin/Creatinine Ratio -ACR                        | 160.00      |
| 944 | LAB3034  | Transferrin saturation %                                          | 260.00      |
| 945 | LAB3035  | Estimated GFR (by MDRD)                                           | 60.00       |
| 946 | LAB3099  | Anti-Sperm Abs (ASA), Semen (MAR Test)                            | 600.00      |
| 947 | LAB3157  | Measles (Rubeola) Antibodies, IgG & IgM                           | 420.00      |
| 948 | LAB3171  | Mumps Virus Antibody, IgG & IgM                                   | 420.00      |
| 949 | LAB3407  | Chlamydia Pneumonia IgG & IgA Abs                                 | 270.00      |
| 950 | LAB3408  | Mycoplasma IgA, IgG & IgM Abs                                     | 350.00      |
| 951 | LAB3409  | Legionella Absustafa El-Ahwal (MBA, FCA, ACCA)                    | 800.00      |

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|------|----------|----------------------------------------------------------------|-------------|
| 952  | LAB3410  | Chlamydia Psittaci IgA & IgM Abs                               | 270.00      |
| 953  | LAB40002 | Bleeding Time                                                  | 40.00       |
| 954  | LAB40005 | Manual Differential                                            | 60.00       |
| 955  | LAB40055 | Absolute Eosinophils Count                                     | 66.00       |
| 956  | LAB40080 | Hematocrit                                                     | 40.00       |
| 957  | LAB40085 | Hemoglobin                                                     | 50.00       |
| 958  | LAB40190 | Eosinophils, Nasal                                             | 60.00       |
| 959  | LAB40192 | Eosinophils, Sputum                                            | 60.00       |
| 960  | LAB40235 | Platelets Count                                                | 66.00       |
| 961  | LAB40270 | Red Blood Cell Count                                           | 70.00       |
| 962  | LAB40280 | Reticulocytes                                                  | 100.00      |
| 963  | LAB40320 | White Blood Cell Count                                         | 66.00       |
| 964  | LAB40325 | Erythrocyts Sedimentation Rate (ESR)                           | 50.00       |
| 965  | LAB49025 | Malaria Smear (Giemsa Stain)                                   | 100.00      |
| 966  | LAB49026 | Malaria Ag qualitative screen test                             | 150.00      |
| 967  | LAB50011 | RPR (Rapid Plasma Reagin)                                      | 110.00      |
| 968  | LAB50065 | Anti-Mitochondrial Antibody (AMA)                              | 250.00      |
| 969  | LAB50075 | Thyroid Peroxidase (TPO) Antibody                              | 200.00      |
| 970  | LAB50080 | Anti-Nuclear Antibody (ANA)                                    | 240.00      |
| 971  | LAB50105 | Thyroglobulin Antibody (Anti TG )                              | 200.00      |
| 972  | LAB50165 | Cytomegalovirus Antibody, IgG                                  | 190.00      |
| 973  | LAB50166 | Cortisol PM                                                    | 270.00      |
| 974  | LAB50167 | Varicella-Zoster Virus Antibody, IgG                           | 250.00      |
| 975  | LAB50182 | C-Reactive Protein (Quantitative)                              | 100.00      |
| 976  | LAB50185 | Cryoglobulin, Qualitative                                      | 80.00       |
| 977  | LAB50203 | Microalbumin, Urine                                            | 200.00      |
| 978  | LAB5029  | Herpes simplex virus type 1 & 2 IgM                            | 220.00      |
| 979  | LAB50292 | Herpes Simplex Virus Type 1 & 2 IgG and IgM                    | 400.00      |
| 980  | LAB50334 | Brucella Antibody, Aggultination Test                          | 150.00      |
| 981  | LAB50340 | Immunoglobulin A, Serum                                        | 100.00      |
| 982  | LAB50350 | Immunoglobulin G, Serum                                        | 100.00      |
| 983  | LAB50355 | Immunoglobulin M, Serum                                        | 100.00      |
| 984  | LAB50385 | Infectious Mononucleosis Slide Test by LATEX (Monospot Screen) | 130.00      |
| 985  | LAB50435 | Prealbumin, Serum                                              | 110.00      |
| 986  | LAB50520 | Hemoglobin S, Evaluation                                       | 200.00      |
| 987  | LAB50521 | Toxoplasma gondii Antibodies, IgG & IgM                        | 360.00      |
| 988  | LAB50551 | Rubella Antibody, IgM                                          | 200.00      |
| 989  | LAB50553 | Cytomegalovirus Antibody, IgM                                  | 200.00      |
| 990  | LAB50557 | Toxoplasma Antibody, IgM                                       | 200.00      |
| 991  | LAB50570 | Transferrin, Serum                                             | 155.00      |
| 992  | LAB50596 | Anti-Parietal Cell Antibody (APCA)                             | 220.00      |
| 993  | LAB50610 | Hemoglobin Electrophoresis                                     | 200.00      |
| 994  | LAB50620 | Red Cell Antigen Typing (HMC)                                  | 150.00      |
| 995  | LAB50621 | Review of Slides by Pathologist                                | 150.00      |
| 996  | LAB50623 | Type & hold, transfusion service                               | 200.00      |
| 997  | LAB50624 | Fresh Frozen Plasma, 1 unit(FFP), transfusion service          | 200.00      |
| 998  | LAB50625 | Red Blood Cells, 1 Unit (RBC)                                  | 600.00      |
| 999  | LAB50627 | Crossmatch , additional unit, transfusion service              | 100.00      |
| 1000 | LAB50628 | Antibody Identification HMC)                                   | 120.00      |
| 1001 | LAB50629 | Antibody Titration (HMC)                                       | 220.00      |
| 1002 | LAB50630 | Immunoglobulins, Serum Quantitative (IgG, IgA, IgM)            | 270.00      |
| 1003 | LAB50631 | Filter platelets concentrates, transfusion service             | 300.00      |
| 1004 | LAB50632 | Cryoprecipitate, transfusion service                           | 300.00      |

Mastala El-Ahwal (MBA, FCA, ACCA)

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|------|-----------|------------------------------------------------------------------|-------------|
| 1005 | LAB50645  | Thyroid Antibodies (Anti TG & Anti TPO)                          | 360.00      |
| 1006 | LAB50658  | Protein Electrophoresis                                          | 200.00      |
| 1007 | LAB50738  | Anti-Smooth Muscle Antibody (ASMA)                               | 240.00      |
| 1008 | LAB50770  | Toxoplasma Antibody, IgG                                         | 190.00      |
| 1009 | LAB50771  | Rubella Antibody, IgG                                            | 190.00      |
| 1010 | LAB50777  | Treponema pallidum Antibody                                      | 150.00      |
| 1011 | LAB54441  | ABO Group & Rh Type (Slide Method)                               | 25.00       |
| 1012 | LAB55306  | Rheumatoid Factor Quantitative                                   | 160.00      |
| 1013 | LAB55312  | Streptolysin O Antibody (ASO) Quantitative                       | 150.00      |
| 1014 | LAB55356  | Hepatitis B surface Antigen Confirmatory                         | 270.00      |
| 1015 | LAB5831   | Chromosomal Analysis, FISH                                       | 2,000.00    |
| 1016 | LAB60046  | Stool, Cryptosporidium Acid Fast Stain                           | 100.00      |
| 1017 | LAB60051  | Rectal Swab (Tape Preparation for Pinworm)                       | 55.00       |
| 1018 | LAB60060  | Blood Culture, AFB Screen                                        | 300.00      |
| 1019 | LAB60067  | Liver Fluid For Echinococcus                                     | 150.00      |
| 1020 | LAB60101  | Gram Stain                                                       | 70.00       |
| 1021 | LAB60102  | Blood Culture & Sensitivity                                      | 260.00      |
| 1022 | LAB60103  | Bone Culture & Sensitivity                                       | 220.00      |
| 1023 | LAB60104  | Bone Marrow Culture - Bottle System                              | 260.00      |
| 1024 | LAB60106  | CSF Culture & Sensitivity                                        | 220.00      |
| 1025 | LAB60107  | Swab Endometrial Culture & Sensitivity                           | 240.00      |
| 1026 | LAB60110  | Stool, Routine Examination                                       | 65.00       |
| 1027 | LAB60115  | Cervical Swab Culture & Sensitivity                              | 230.00      |
| 1028 | LAB60118  | Tissue Culture & Sensitivity                                     | 220.00      |
| 1029 | LAB60122  | Swab Throat Culture & Sensitivity                                | 220.00      |
| 1030 | LAB60124  | Swab Penile Culture & Sensitivity                                | 220.00      |
| 1031 | LAB60126  | Swab Groin/Rectal Culture & Sensitivity                          | 220.00      |
| 1032 | LAB60131  | Urine Culture & Sensitivity                                      | 220.00      |
| 1033 | LAB60132  | Swab Wound Culture & Sensitivity                                 | 220.00      |
| 1034 | LAB60134  | Stool, Routine Culture & Sensitivity                             | 220.00      |
| 1035 | LAB60135  | Stool Culture, Campylobacter                                     | 220.00      |
| 1036 | LAB60136  | Stool Culture & Sensitivity, Vibrio Cholera                      | 220.00      |
| 1037 | LAB60137  | Stool Culture, Yersinia                                          | 220.00      |
| 1038 | LAB60138  | Stool, Clostridium Difficile Toxin                               | 165.00      |
| 1039 | LAB60142  | Swab Eye Culture & Sensitivity                                   | 220.00      |
| 1040 | LAB60143  | High Vaginal Swab Culture & Sensitivity (Routine))               | 240.00      |
| 1041 | LAB60143W | High Vaginal Swab, Wet Preparation                               | 60.00       |
| 1042 | LAB60146  | CSF India Ink For Cryptococcus                                   | 70.00       |
| 1043 | LAB60150  | Fungal Culture                                                   | 220.00      |
| 1044 | LAB60151  | AFB Stain (3 samples)                                            | 185.00      |
| 1045 | LAB60152  | Synovial Fluid Culture & Sensitivity                             | 220.00      |
| 1046 | LAB60153  | Spirochete, Dark Field exam                                      | 70.00       |
| 1047 | LAB60159  | Brucella Culture-Bottle System                                   | 260.00      |
| 1048 | LAB60161  | Fungal Microscopy - KOH Prep                                     | 80.00       |
| 1049 | LAB60198  | High Vaginal Swab w/ IUCD, PAIN, PID, POST Culture & Sensitivity | 240.00      |
| 1050 | LAB60209  | Swab Urethral Culture & Sensitivity                              | 220.00      |
| 1051 | LAB60219  | Prostatic Fluid Culture & Sensitivity                            | 220.00      |
| 1052 | LAB60221  | Sputum Culture & Sensitivity                                     | 220.00      |
| 1053 | LAB60222  | Tracheal Aspirate Culture & Sensitivity                          | 220.00      |
| 1054 | LAB60240  | Stool, Ova & Parasite-Concentration Method                       | 130.00      |
| 1055 | LAB60245  | Peritoneal Fluid Culture & Sensitivity                           | 220.00      |
| 1056 | LAB60250  | Plasmin Inhibitor                                                | 180.00      |
| 1057 | LAB60359  | Swab (Nasal) Culture & Sensitivity                               | 220.00      |

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|------|-----------|---------------------------------------------------------|-------------|
| 1058 | LAB60361  | Swab Ear Culture & Sensitivity                          | 220.00      |
| 1059 | LAB603611 | Swab C/S (Bacteria & Fungal)                            | 290.00      |
| 1060 | LAB60999  | Urinalysis, Enhanced (Cell count, Gram Stain, Dipstick) | 120.00      |
| 1061 | LAB61162  | Swab Nasopharyngeal Culture & Sensitivity               | 220.00      |
| 1062 | LAB63998  | Bronchial Aspirate Culture & Sensitivity                | 220.00      |
| 1063 | LAB65070  | Swab Umbilical Culture & Sensitivity                    | 220.00      |
| 1064 | LAB65088  | Stool, Rotavirus Antigen                                | 130.00      |
| 1065 | LAB65147  | Helicobacter pylori Antibody IgG                        | 175.00      |
| 1066 | LAB70010  | Semen Fluid Culture & Sensitivity                       | 220.00      |
| 1067 | LAB70025  | Total-hCG, serum Quantitative                           | 200.00      |
| 1068 | LAB70030  | Cortisol AM                                             | 270.00      |
| 1069 | LAB70031  | Swab Appendix Culture & Sensitivity                     | 220.00      |
| 1070 | LAB70032  | Swab Sinus Culture & Sensitivity                        | 220.00      |
| 1071 | LAB70033  | Swab Skin Culture & Sensitivity                         | 220.00      |
| 1072 | LAB70035  | Cyclosporine A                                          | 350.00      |
| 1073 | LAB70045  | Estradiol (E2)                                          | 200.00      |
| 1074 | LAB70055  | Follicle Stimulating Hormone (FSH), Serum               | 200.00      |
| 1075 | LAB70063  | Insulin, fasting                                        | 250.00      |
| 1076 | LAB70065  | Ferritin                                                | 180.00      |
| 1077 | LAB70070  | Folate, Serum, Fasting                                  | 220.00      |
| 1078 | LAB70093  | Luteinizing Hormone, Serum (LH)                         | 200.00      |
| 1079 | LAB70110  | Progesterone                                            | 200.00      |
| 1080 | LAB70115  | Prolactin (Fasting)                                     | 200.00      |
| 1081 | LAB70121  | Prostate Specific Antigen, (PSA) Total/3rd Generation   | 200.00      |
| 1082 | LAB70130  | Testosterone Total                                      | 200.00      |
| 1083 | LAB70133  | Triiodothyronine, Free (Free T3)                        | 200.00      |
| 1084 | LAB70138  | Thyroxine, Free (Free T4)                               | 200.00      |
| 1085 | LAB70138C | Thyroxine, Free cord blood (Free T4-C)                  | 200.00      |
| 1086 | LAB70140  | Thyroxine (T4) Total                                    | 200.00      |
| 1087 | LAB70145  | Thyroid Stimulating Hormone (TSH)                       | 200.00      |
| 1088 | LAB70145C | Thyroid Stimulation Hormone cord blood (TSH-C)          | 200.00      |
| 1089 | LAB70150  | Vitamin B12                                             | 220.00      |
| 1090 | LAB70193  | Clotting Time                                           | 50.00       |
| 1091 | LAB70474  | Triiodothyronine, Total (Total T3)                      | 200.00      |
| 1092 | LAB78005  | MRSA Screen Culture & Sensitivity (9 samples)           | 270.00      |
| 1093 | LAB80009  | Ascitic Fluid Culture & Sensitivity                     | 230.00      |
| 1094 | LAB80080  | Carcinoembryonic Antigen (CEA)                          | 250.00      |
| 1095 | LAB80135  | Glucose-6-Phosphate Dehydrogenase (G6PD), Screen        | 160.00      |
| 1096 | LAB80206  | Prostate Specific Antigen, (PSA RATIO)                  | 380.00      |
| 1097 | LAB80235  | Pericardial Fluid Culture & Sensitivity                 | 220.00      |
| 1098 | LAB80420  | Miscellaneous Culture                                   | 220.00      |
| 1099 | LAB80428  | Alpha Feto Protein (AFP)                                | 250.00      |
| 1100 | LAB80449  | Swab Abscess Culture & Sensitivity                      | 220.00      |
| 1101 | LAB80453  | Hemoglobin A1c                                          | 175.00      |
| 1102 | LAB80461  | Cancer Antigen 19-9 (CA 19-9)                           | 250.00      |
| 1103 | LAB80462  | Cancer Antigen 125 (CA 125)/ OM-MA                      | 250.00      |
| 1104 | LAB80464  | Cancer Antigen 15-3 (CA 15-3) /BR-MA                    | 250.00      |
| 1105 | LAB80650  | Cholinesterase                                          | 100.00      |
| 1106 | LAB83001  | Gastric Fluid / Vomitus Culture & Sensitivity           | 220.00      |
| 1107 | LAB90005  | Troponin I                                              | 200.00      |
| 1108 | LAB90080  | Digoxin                                                 | 200.00      |
| 1109 | LAB90085  | Digitoxin                                               | 200.00      |
| 1110 | LAB90090  | Phenytoin                                               | 180.00      |

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|------|-----------|-----------------------------------------------------------------------|-------------|
| 1111 | LAB90130  | Gentamicin, Random Level                                              | 150.00      |
| 1112 | LAB90251  | Salicylate Assay                                                      | 125.00      |
| 1113 | LAB90270  | Tobramycin, Random Level                                              | 150.00      |
| 1114 | LAB90285  | Vancomycin, Random Level                                              | 150.00      |
| 1115 | LAB90290  | Valproic Acid ( Depakine)                                             | 180.00      |
| 1116 | LAB90305  | Gentamicin, Peak Level                                                | 150.00      |
| 1117 | LAB90310  | Gentamicin, Trough Level                                              | 150.00      |
| 1118 | LAB90315  | Tobramycin, Peak Level                                                | 150.00      |
| 1119 | LAB90320  | Tobramycin, Trough Level                                              | 150.00      |
| 1120 | LAB90325  | Vancomycin, Peak Level                                                | 150.00      |
| 1121 | LAB90330  | Vancomycin, Trough Level                                              | 150.00      |
| 1122 | LAB91322  | Amniotic Fluid Culture & Sensitivity                                  | 220.00      |
| 1123 | LAB91328  | Conjunctival Culture & Sensitivity                                    | 220.00      |
| 1124 | LAB91366  | Pus/Lesion Culture & Sensitivity                                      | 220.00      |
| 1125 | LAB91374  | Pleural Fluid Culture & Sensitivity                                   | 220.00      |
| 1126 | LAB91376  | Corneal Scrappings Culture & Sensitivity                              | 220.00      |
| 1127 | LAB91565  | Phenobarbital, Serum or Plasma                                        | 180.00      |
| 1128 | LAB93013  | CSF Full Bacterial Antigen Panel                                      | 350.00      |
| 1129 | LAB93066  | Febrile Agglutination Test                                            | 270.00      |
| 1130 | LAB93093  | Anti -dDNA                                                            | 250.00      |
| 1131 | LAB93143  | Weil-Felix Test (OXK, OX19, OX2)                                      | 90.00       |
| 1132 | LAB93185  | Widal Test                                                            | 150.00      |
| 1133 | LAB9500   | Synovial Fluid, Crystals                                              | 50.00       |
| 1134 | LAB95018  | Cell Count, CSF                                                       | 100.00      |
| 1135 | LAB95019  | Cell Count, Body Fluid                                                | 100.00      |
| 1136 | LAB97321  | Swab Mouth/Gum/Tongue Culture & Sensitivity                           | 220.00      |
| 1137 | LAB98115  | Fluid, Culture and Sensitivity                                        | 220.00      |
| 1138 | LAB98581  | Prostate Specific Antigen (PSA) ( Free)                               | 200.00      |
| 1139 | LAB99290  | CBC with Platelet Count & Automated Differential                      | 110.00      |
| 1140 | LAB99351  | Catheter Tip, Drainage Tip Culture & Sensitivity                      | 220.00      |
| 1141 | LAB99411  | Schistosoma Antibodies                                                | 220.00      |
| 1142 | LAB99412  | Anti-Smooth Muscle Antibody quantitative (ASMA-quantitative)          | 300.00      |
| 1143 | LAB99413  | Anti-Hu                                                               | 150.00      |
| 1144 | LAB99521  | Breast Milk /Nipple Discharge Culture & Sensitivity                   | 220.00      |
| 1145 | LAB99580  | Bile/Gallbladder Fluid Culture & Sensitivity                          | 220.00      |
| 1146 | LAB99589  | Mumps Virus Antibody, IgM - IT USE                                    | 250.00      |
| 1147 | LAB99745  | Wet preparation                                                       | 60.00       |
| 1148 | LAB99746  | Liver Fluid Culture & Sensitivity                                     | 220.00      |
| 1149 | LAB997480 | Urinalysis, Complete                                                  | 55.00       |
| 1150 | LAB99749  | AFB stain (one sample)                                                | 80.00       |
| 1151 | LAB99750  | Microscopic examination, body fluids                                  | 80.00       |
| 1152 | LAB99752  | Protein C resistant                                                   | 300.00      |
| 1153 | LAB99753  | Gastrin                                                               | 270.00      |
| 1154 | LAB99754  | Processing of tissue sections in cassette                             | 150.00      |
| 1155 | LAB99755  | Staining of slides for pap or FNA                                     | 150.00      |
| 1156 | LAB99756  | Palladium (Urine or serum)                                            | 510.00      |
| 1157 | LAB99757  | Quantiferon Gold test for Mycobacteria                                | 700.00      |
| 1158 | LAB99852  | Bence Jones Protein, Qualitative- Random urine                        | 75.00       |
| 1159 | LAB99853  | Hereditary chronic pancreatitis. Sequence analysis of the PRSS1-gene  | 7,000.00    |
| 1160 | LAB99854  | Hereditary chronic pancreatitis. Sequence analysis of the SPINK1-gene | 5,850.00    |
| 1161 | LAB99855  | Hereditary chronic pancreatitis. Mutations Oligoligation assay tech   | 2,200.00    |
| 1162 | LAB99856  | Factor II (Prothrombin gene mutation)                                 | 820.00      |
| 1163 | LAB99857  | Methylenetetrahydrofolate reductase (MTHFR)                           | 1,680.00    |

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| SR   | CODE     | DESCRIPTION                                                                   | PRICE (QAR) |
|------|----------|-------------------------------------------------------------------------------|-------------|
| 1164 | LAB99858 | Histopathology - second opinion by reference lab- Bioscientia                 | 550.00      |
| 1165 | LAB99859 | Renal biopsy (Light microscopy, immunohistochemistry and electron microscopy) | 3,100.00    |
| 1166 | LAB99860 | Measles (Rubeola) virus IgG antibody                                          | 200.00      |
| 1167 | LAB99861 | Mumps virus IgG antibody                                                      | 200.00      |
| 1168 | LAB99862 | Bordetella Pertussis (Whooping cough) virus IgG antibody                      | 200.00      |
| 1169 | LAB99863 | Influenza A/H1N1 virus by PCR-swab                                            | 730.00      |
| 1170 | LAB99864 | Influenza A Ag, nasopharyngeal                                                | 140.00      |
| 1171 | LAB99865 | Synacthen Profile                                                             | 750.00      |
| 1172 | LAB99866 | Hereditary Spastic Paraplegia Gene 7 (SPG7)                                   | 3,700.00    |
| 1173 | LAB99867 | Complete Sequence of SPG7 gene                                                | 13,700.00   |
| 1174 | LAB99868 | Lepra Antibodies                                                              | 330.00      |
| 1175 | LAB99871 | High sensitive CRP for CV risk assessment                                     | 300.00      |
| 1176 | LAB99873 | Anti-tissue transglutaminase IgA abs (anti-tTG IgA)                           | 250.00      |
| 1177 | LAB99874 | Yersinia IgA & IgG ABS                                                        | 410.00      |
| 1178 | LAB99875 | Echinococcus Western Blot                                                     | 1,100.00    |
| 1179 | LAB99876 | MRSA Screen Preadmissions (3 samples)                                         | 130.00      |
| 1180 | LAB99877 | TPMT activity (Thiopurine Methyl Transferase)                                 | 290.00      |
| 1181 | LAB99878 | Phlebotomy service                                                            | 50.00       |
| 1182 | LAB99879 | T4/T8 Lymphocyte (CD3,CD4, CD8)                                               | 470.00      |
| 1183 | LAB99880 | Herpes Simplex Virus Type 1 & 2 IgG                                           | 200.00      |
| 1184 | LAB99881 | SCL 70 ABS (Scleroderma 70 ABS)                                               | 250.00      |
| 1185 | LAB99882 | Synovial fluid profile (Ptn,Glu,Cryst,Cont,Gram)                              | 345.00      |
| 1186 | LAB99883 | Gall bladder for biopsy                                                       | 580.00      |
| 1187 | LAB99884 | Appendix for biopsy                                                           | 580.00      |
| 1188 | LAB99885 | Skin Biopsy                                                                   | 580.00      |
| 1189 | LAB99886 | Breast mass for biopsy                                                        | 840.00      |
| 1190 | LAB99887 | Thyroid for biopsy                                                            | 1,160.00    |
| 1191 | LAB99888 | Cervical Biopsy ( Colposcopy )                                                | 780.00      |
| 1192 | LAB99889 | Placenta for biopsy                                                           | 840.00      |
| 1193 | LAB99890 | Prostatic Needle Biopsy                                                       | 5,000.00    |
| 1194 | LAB99891 | Kidney for biopsy                                                             | 2,520.00    |
| 1195 | LAB99892 | Uterus ( Body + Cervix ) for biopsy                                           | 1,700.00    |
| 1196 | LAB99893 | Total abdominal hysterectomy w/ bilateral salpingo-oophorectomy for biopsy    | 2,550.00    |
| 1197 | LAB99894 | Ovary/ Ovarian cyst for biopsy                                                | 840.00      |
| 1198 | LAB99895 | Mastectomy for biopsy                                                         | 1,680.00    |
| 1199 | LAB99896 | Axillary clearance for biopsy                                                 | 840.00      |
| 1200 | LAB99897 | ER/PR + Herceptin ( Immuno for Breast Ca )                                    | 2,500.00    |
| 1201 | LAB99898 | Pyrilinks-D (bone marker)                                                     | 300.00      |
| 1202 | LAB99899 | Osteocalcin (bone marker)                                                     | 300.00      |
| 1203 | LAB99900 | Benzene                                                                       | 500.00      |
| 1204 | LAB99901 | Ophthalmology Pre-operative Screen (Child)                                    | 300.00      |
| 1205 | LAB99902 | Ophthalmology Pre-operative Screen (Adult)                                    | 1,000.00    |
| 1206 | LAB99903 | Benzene metabolite, spot urine                                                | 1,100.00    |
| 1207 | LAB99904 | Dengue Virus IgG & IgM rapid screen test                                      | 250.00      |
| 1208 | LAB99905 | Stool, Giardia Lamblia cyst rapid test                                        | 150.00      |
| 1209 | LAB99906 | Stool, Cryptosporidium antigens rapid test                                    | 150.00      |
| 1210 | LAB99907 | Stool, Adenovirus Antigen                                                     | 150.00      |
| 1211 | LAB99908 | Coccidioides Abs                                                              | 180.00      |
| 1212 | LAB99909 | Anti JO-1                                                                     | 310.00      |
| 1213 | LAB99910 | HLA B51                                                                       | 800.00      |
| 1214 | LAB99911 | Syndrome Type 1 (FBN1 gene)                                                   | 24,000.00   |
| 1215 | LAB99912 | Breast - Ovarian cancer/gene analysis(BRCA1& 2)                               | 32,250.00   |
| 1216 | LAB99918 | Neonatal Metabolic Screen (Card) non-resident                                 | 240.00      |

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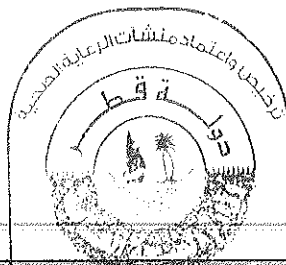
| SR   | CODE     | DESCRIPTION                                                                | PRICE (QAR) |
|------|----------|----------------------------------------------------------------------------|-------------|
| 1217 | LAB99940 | Strongyloides IgG Antibody                                                 | 400.00      |
| 1218 | LAB99942 | Sodium, Urine Spot                                                         | 80.00       |
| 1219 | LAB99947 | Beta Trace Proteins                                                        | 325.00      |
| 1220 | LAB99948 | Mosaic Study                                                               | 415.00      |
| 1221 | LAB99914 | Lactate Dehydrogenase, Fluid                                               | 75.00       |
| 1222 | LAB99915 | Amylase, Fluid                                                             | 130.00      |
| 1223 | LAB99917 | Creatinine, Fluid                                                          | 60.00       |
| 1224 | LAB99932 | Corrected Calcium                                                          | 190.00      |
| 1225 | LAB99941 | Potassium, Urine Spot                                                      | 80.00       |
| 1226 | LAB99953 | Calcium Spot Urine                                                         | 80.00       |
| 1227 | LAB99954 | Urea Spot Urine                                                            | 60.00       |
| 1228 | LAB99955 | Albumin, body fluid                                                        | 110.00      |
| 1229 | LAB99959 | Beta Thalassemia Molecular Genetic Test                                    | 3,650.00    |
| 1230 | LAB99960 | Aquaporin-4 qualitative, serum                                             | 410.00      |
| 1231 | LAB99961 | Aquaporin-4 quantitative, serum                                            | 410.00      |
| 1232 | LAB99962 | Aquaporin-4 qualitative, CSF                                               | 410.00      |
| 1233 | LAB99963 | Microbiology strain for identification & antimicrobial susceptibility test | 200.00      |
| 1234 | LAB99964 | Neuro profile 2: Thrombosis tendency profile                               | 3,150.00    |
| 1235 | LAB99965 | Neuro profile 1: Brain memory profile                                      | 2,230.00    |
| 1236 | LAB99966 | Diabetic profile                                                           | 400.00      |
| 1237 | LAB99967 | Endometrial currettings                                                    | 840.00      |
| 1238 | LAB99968 | Endocervical curettings                                                    | 840.00      |
| 1239 | LAB99979 | fallopian tube biopsy (Single)                                             | 580.00      |
| 1240 | LAB99980 | Bilateral fallopian tube biopsy                                            | 1,160.00    |
| 1241 | LAB99981 | Products of conception biopsy                                              | 840.00      |
| 1242 | LAB99982 | Fibroid                                                                    | 840.00      |
| 1243 | LAB99983 | Cervical polyp                                                             | 840.00      |
| 1244 | LAB99984 | Bartholin's cyst                                                           | 840.00      |
| 1245 | LAB99985 | Endoscopic /Colonoscopic biopsy                                            | 420.00      |
| 1246 | LAB99986 | Prostatectomy                                                              | 2,200.00    |
| 1247 | LAB99987 | Prostatic chips biopsy (TUR)                                               | 1,800.00    |
| 1248 | LAB99988 | Gonadal vein ( varicocele) single                                          | 580.00      |
| 1249 | LAB99989 | Gonadal vein (bilateral varicocele)                                        | 1,160.00    |
| 1250 | LAB99990 | Testicular biopsy                                                          | 840.00      |
| 1251 | LAB99991 | Bladder biopsy                                                             | 840.00      |
| 1252 | LAB99992 | Endo-bronchial biopsy                                                      | 420.00      |
| 1253 | LAB99993 | Lymph node biopsy (suspected lymphoma)                                     | 2,500.00    |
| 1254 | LAB99994 | Lymph node biopsy                                                          | 840.00      |
| 1255 | LAB99995 | Sebaceous cyst                                                             | 840.00      |
| 1256 | LAB99996 | Perianal fistula                                                           | 840.00      |
| 1257 | LAB99997 | Tonsils biopsy (suspected lymphoma)                                        | 2,000.00    |
| 1258 | LAB99998 | Tonsils                                                                    | 840.00      |
| 1259 | LAB99999 | Gastric sleeve biopsy                                                      | 840.00      |
| 1260 | LAB10021 | Novel corona virus PCR                                                     | 1,000.00    |
| 1261 | LAB10024 | Prader Willi Syndrome (PWS) molecular genetics analysis                    | 2,600.00    |
| 1262 | LAB10022 | Cotinine (Serum or Urine)                                                  | 400.00      |
| 1263 | LAB10023 | Tissue cross-match                                                         | 1,600.00    |
| 1264 | LAB10028 | Phlebotomy service, home visit                                             | 500.00      |
| 1265 | LAB10029 | VIP (Vasoactive Intestinal Polypeptide)                                    | 530.00      |
| 1266 | LAB10030 | Glucose Tolerance test (Pregnant) (75 g)                                   | 230.00      |
| 1267 | LAB10031 | Borrelia Abs IgG                                                           | 275.00      |
| 1268 | LAB10032 | Borrelia Abs IgM                                                           | 275.00      |
| 1269 | LAB10033 | EBV-VCA-abs(IgG)                                                           | 200.00      |

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| SR   | CODE     | DESCRIPTION                                                                          | PRICE (QAR) |
|------|----------|--------------------------------------------------------------------------------------|-------------|
| 1270 | LAB10034 | EBV-VCA-abs(IgM)                                                                     | 250.00      |
| 1271 | LAB10035 | EBV-EBNA-abs(IgG)                                                                    | 200.00      |
| 1272 | LAB10036 | Food Intolerance Test (Food IgG Antibody Test)                                       | 1,800.00    |
| 1273 | LAB10037 | Post-Prostatic Massage Urine Analysis                                                | 55.00       |
| 1274 | LAB10038 | Post-Prostatic Massage Urine Culture & Sensitivity                                   | 220.00      |
| 1275 | LAB10039 | Panorama Test,Non-Invasive Prenatal Testing (NIPT)                                   | 3,500.00    |
| 1276 | LAB10040 | T + B Lymphocyte differentiation (lymphocytes total, CD3, CD4, CD8, CD16/CD56, CD19) | 950.00      |
| 1277 | LAB10041 | Block cutting and staining                                                           | 100.00      |
| 1278 | LAB10042 | Block cutting without staining                                                       | 50.00       |
| 1279 | LAB10043 | Block preparation without cutting                                                    | 75.00       |
| 1280 | LAB10044 | Human Papilloma Virus DNA high risk group (HPV-DNA high risk group)                  | 500.00      |
| 1281 | LAB10045 | Cervical Cancer and Precancer tests (HPV-DNA high risk group +PAP'S smear)           | 750.00      |
| 1282 | LAB10046 | Measles(Rubeola)Antibody ,IgM                                                        | 250.00      |
| 1283 | LAB10047 | Mumps Virus Antibody,IgM                                                             | 250.00      |
| 1284 | LAB10048 | Familial Mediterranean Fever (FMF) genetic test                                      | 2,100.00    |
| 1285 | LAB10049 | Helicobacter pylori urea breath test (UBT)                                           | 360.00      |
| 1286 | LAB10050 | Dysmorphic Red Blood Cells (dRBC) in urine                                           | 100.00      |
| 1287 | LAB10051 | Horizon 4 panel (CF, SMA, Fragile X, DMD)                                            | 2,900.00    |
| 1288 | LAB10052 | Horizon 27 panel (Pan-ethnic Standard)                                               | 3,500.00    |
| 1289 | LAB10053 | Horizon 174 panel (Pan-ethnic Extended)                                              | 4,000.00    |
| 1290 | LAB10054 | Anora miscarriage test                                                               | 4,000.00    |
| 1291 | LAB10055 | Ganglioside Profile                                                                  | 1,150.00    |
| 1292 | LAB10056 | Ganglioside GM3 (IgG & IgM)                                                          | 320.00      |
| 1293 | LAB10057 | Musk Antibodies (Muscle Spec. Receptor Tyrosinkinase Antibodies)                     | 405.00      |
| 1294 | LAB10058 | Titin Antibodies                                                                     | 405.00      |
| 1295 | LAB10059 | Amphiphysin Antibodies                                                               | 405.00      |
| 1296 | LAB10060 | NMDA Receptor Antibody, serum/CSF                                                    | 405.00      |
| 1297 | LAB10061 | AMPA Receptor Antibodies, serum/CSF                                                  | 405.00      |
| 1298 | LAB10062 | Recoverin Antibodies                                                                 | 270.00      |
| 1299 | LAB10063 | Anti YO (Purkinje cells Antibodies)                                                  | 170.00      |
| 1300 | LAB10064 | Anti RI                                                                              | 150.00      |
| 1301 | LAB10065 | MA Antibodies IgG, IgA, IgM Qualitative                                              | 205.00      |
| 1302 | LAB10066 | MA Antibodies IgG, IgA, IgM Quantitative                                             | 325.00      |
| 1303 | LAB10067 | GABA-B- Receptor 1 Antibodies, serum/CSF                                             | 320.00      |
| 1304 | LAB10068 | LGI - 1 Antibodies spec. IgG (Leucine Rich Gliomatinactivated protein 1), serum/CSF  | 320.00      |
| 1305 | LAB10069 | SOX 1 Antibodies                                                                     | 227.00      |
| 1306 | LAB10070 | CASPR - 2 Antibody IgG (Contactin Associated Protein 2), CSF                         | 320.00      |
| 1307 | LAB10071 | Anti-Nuclear Antibody Quantitative(ANA)                                              | 300.00      |
| 1308 | LAB10072 | Varicella Zoster virus antibody IgM                                                  | 250.00      |
| 1309 | LAB10073 | Orchidectomy (complete testis)                                                       | 2,200.00    |
| 1310 | LAB10074 | Liver biopsy                                                                         | 2,000.00    |
| 1311 | LAB10075 | Lipoma                                                                               | 840.00      |
| 1312 | LAB10076 | Esophageal brushing                                                                  | 350.00      |
| 1313 | LAB10078 | Chlamydia trachomatis DNA-PCR and Neisseria gonorrhoeae DNA-PCR                      | 800.00      |
| 1314 | LAB10079 | Anti RO 60                                                                           | 200.00      |
| 1315 | LAB10080 | Anti RO 52                                                                           | 200.00      |
| 1316 | LAB10081 | SSA Abs                                                                              | 400.00      |
| 1317 | LAB10082 | SSB Abs                                                                              | 250.00      |
| 1318 | LAB10083 | Connective tissue diseases screen (CTD screen)                                       | 250.00      |
| 1319 | LAB10084 | Anti 2tissue transglutaminase IgG (anti-tTG IgG)                                     | 250.00      |
| 1320 | LAB10085 | Panorama extended panel                                                              | 4,000.00    |
| 1321 | LAB10086 | Phosphatidylethanolamine Abs                                                         | 380.00      |
| 1322 | LAB10087 | Phosphatidylserine Abs (IgG & IgM)                                                   | 650.00      |



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| SR   | CODE     | DESCRIPTION                                             | PRICE (QAR) |
|------|----------|---------------------------------------------------------|-------------|
| 1323 | LAB10088 | Phospholipase -A2- receptor Abs (qualitative) (PLA2QL)  | 300.00      |
| 1324 | LAB10089 | Phospholipase -A2- receptor Abs (quantitative) (PLA2QN) | 300.00      |
| 1325 | LAB10090 | Anti SP 100                                             | 200.00      |

| NEUROLOGY                      |         |                                                         |          |
|--------------------------------|---------|---------------------------------------------------------|----------|
| Clinical Services / Procedures |         |                                                         |          |
| 1                              | NEU0001 | EMG (electromyography) study                            | 450.00   |
| 2                              | NEU0002 | NCS (nerve conduction) study                            | 450.00   |
| 3                              | NEU0003 | EMG (electromyography) & NCS (nerve conduction) studies | 600.00   |
| 4                              | NEU0006 | AEP (Acoustic Evoked Potentials)                        | 600.00   |
| 5                              | NEU0007 | SEP (Somatosensory Evoked Potentials)                   | 600.00   |
| 6                              | NEU0008 | Duplexsonography(Brain Parenchyma) Doppler              | 1,500.00 |
| 7                              | NEU0009 | Duplexsonography(Neck Arteries)                         | 1,200.00 |
| 8                              | NEU0010 | Ultrasound (Nerve/Muscle)                               | 1,200.00 |
| 9                              | NEU0011 | Duplexsonography(Brain Arteries) Doppler                | 1,800.00 |
| 10                             | NEU0012 | Blepharospasm(G24.5) (Excluding Medication)             | 2,500.00 |
| 11                             | NEU0013 | Hemifacial Spasm(G51.3) (Excluding Medication)          | 3,000.00 |
| 12                             | NEU0014 | Cervical Dystonia(G24.3) (Excluding Medication)         | 3,000.00 |
| 13                             | NEU0015 | Spasticity(163.9/G81.1) (Excluding Medication)          | 2,000.00 |
| 14                             | NEU0016 | Complicated Migraine(G43.3) (Excluding Medication)      | 3,000.00 |
| 15                             | NEU0017 | Pediatric E.E.G                                         | 1,000.00 |
| 16                             | SRV0024 | E.E.G                                                   | 660.00   |

| NEURO SURGERY |          |                                                                                                 |            |
|---------------|----------|-------------------------------------------------------------------------------------------------|------------|
| Packages      |          |                                                                                                 |            |
| 1             | PKG15001 | (Neuro-Head-Brain/1 day ICU) Insertion of ICP monitoring Kit                                    | 10,000.00  |
| 2             | PKG15002 | (Neuro-Head-Brain/1 day ICU) Insertion of EVD                                                   | 10,000.00  |
| 3             | PKG15003 | (Neuro-Head-Brain /4 days) VP Shunt Insertion                                                   | 30,000.00  |
| 4             | PKG15004 | (Neuro-Head-Brain /2 days) Burr Hole Brain Biopsy without IGS                                   | 15,000.00  |
| 5             | PKG15005 | (Neuro-Head-Brain /2 days) Neuronavigation Guided Biopsy                                        | 23,000.00  |
| 6             | PKG15006 | (Neuro-Head-Brain /5 days) Repair of Craniosynostosis                                           | 50,000.00  |
| 7             | PKG15007 | (Neuro-Head-Brain /5 days) Burr Holes for Subdural Haematoma                                    | 40,000.00  |
| 8             | PKG15008 | (Neuro-Head-Brain /9 days) Bilateral BH for CSDH                                                | 56,000.00  |
| 9             | PKG15009 | (Neuro-Head-Brain /8 days) Craniotomy for Acute Extradural or Subdural Haematoma                | 60,000.00  |
| 10            | PKG15010 | (Neuro-Head-Brain /3 days) Elevation of Depressed Skull Fracture                                | 31,000.00  |
| 11            | PKG15011 | (Neuro-Head-Brain /7 days) Craniotomy for IC Haematoma                                          | 57,000.00  |
| 12            | PKG15012 | (Neuro-Head-Brain /8 days) Decompressive Craniectomy for Trauma or Oedema                       | 55,000.00  |
| 13            | PKG15013 | (Neuro-Head-Brain /10 days) Craniotomy for Brain Abscess/Empyema                                | 63,000.00  |
| 14            | PKG15014 | (Neuro-Head-Brain /6 days) Craniotomy for Convexity tumours                                     | 60,000.00  |
| 15            | PKG15015 | (Neuro-Head-Brain /9 days) Craniotomy for Complex Convexity tumours                             | 70,000.00  |
| 16            | PKG15016 | (Neuro-Head-Brain /7 days) Craniotomy for Skull base tumours                                    | 85,000.00  |
| 17            | PKG15017 | (Neuro-Head-Brain /10 days) Craniotomy for Complex Skull base tumours                           | 95,000.00  |
| 18            | PKG15018 | (Neuro-Head-Brain /7 days) Craniectomy for Posterior Fossa/ Brain Stem Tumours                  | 90,000.00  |
| 19            | PKG15019 | (Neuro-Head-Brain /10 days) Craniectomy for Complex Posterior Fossa Tumours/ Brain Stem Tumours | 100,000.00 |
| 20            | PKG15020 | (Neuro-Head-Brain /7 days) Microvascular Decompression of Cranial Nerves                        | 85,000.00  |
| 21            | PKG15021 | (Neuro-Head-Brain /14 days) Craniotomy for Aneurysm or AVM                                      | 95,000.00  |
| 22            | PKG15022 | (Neuro-Head-Brain /4 days) Endoscopic Third Ventriculostomy ETV                                 | 43,000.00  |
| 23            | PKG15023 | (Neuro-Head-Brain /7 days) Endoscopic Approach to Ventricular lesion                            | 60,000.00  |
| 24            | PKG15024 | (Neuro-Head-Brain /5 days) Lateral Orbitotomy for Orbital Tumours/Lesions (together with MaxFa  | 85,000.00  |
| 25            | PKG15025 | (Neuro-Head-Brain /5 days) Trans Sphenoidal Approach for Pituitary/ and other lesions           | 60,000.00  |
| 26            | PKG15026 | (Neuro-Head-Brain /2 days) Wound Debridement / 2ndary suture (Deep L1)                          | 13,000.00  |
| 27            | PKG15027 | (Neuro-Head-Brain /2 days) Wound Debridement / 2ndary suture (Deep L2)                          | 15,000.00  |

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| 28                                    | PKG15028 | (Neuro-Head-Brain /2 days) Wound Debridement / 2ndary suture (Deep L3)                         | 20,000.00   |
| 29                                    | PKG15029 | (Neuro-Head-Brain /3 days) Cranioplasty                                                        | 30,000.00   |
| 30                                    | PKG15030 | (Neuro- Head-Brain /1 day) Excision of Scalp Cyst/Lesion                                       | 10,000.00   |
| 31                                    | PKG15501 | (Neuro-Spine /D Case) LP for ICP measurement and/or CSF analysis                               | 10,000.00   |
| 32                                    | PKG15502 | (Neuro-Spine /D Case) Carpal Tunnel Decompression                                              | 13,000.00   |
| 33                                    | PKG15503 | (Neuro-Spine /D Case) Cubital Tunnel Decompression                                             | 17,000.00   |
| 34                                    | PKG15504 | (Neuro-Spine /3 days) Lumbar Microdiscectomy                                                   | 40,000.00   |
| 35                                    | PKG15505 | (Neuro-Spine /4 days) Decompressive L Laminectomy                                              | 50,000.00   |
| 36                                    | PKG15506 | (Neuro-Spine /5 days) Trans Pedicular Screw 2 levels                                           | 62,000.00   |
| 37                                    | PKG15507 | (Neuro-Spine /7 days) Trans Pedicular Screw 3/4 levels                                         | 72,000.00   |
| 38                                    | PKG15508 | (Neuro-Spine /5 days) Recurrent Spinal Procedure                                               | 62,000.00   |
| 39                                    | PKG15509 | (Neuro-Spine /10 days) Anterior Spinal Approach D/L Thoracotomy/ Thoracolumbar                 | 76,000.00   |
| 40                                    | PKG15510 | (Neuro-Spine /10 days) Combined Anterior and Posterior Spinal Approach                         | 100,000.00  |
| 41                                    | PKG15511 | (Neuro-Spine /3 days) Ant. Cervical Microdiscectomy 1 level PEEK Cage without plating          | 60,000.00   |
| 42                                    | PKG15512 | (Neuro-Spine /4 days) Ant. Cervical Microdiscectomy 2-3 levels with Cages and plate and screws | 80,000.00   |
| 43                                    | PKG15513 | (Neuro-Spine /5 days) Ant. Cervical Corpectomy and fusion with Mesh/Expandable Cage and plate  | 90,000.00   |
| 44                                    | PKG15514 | (Neuro-Spine /3 days) Posterior Cervical Decompression                                         | 54,000.00   |
| 45                                    | PKG15515 | (Neuro-Spine /7 days) Combined Ant+Poster Cervical approach and Fusion                         | 80,000.00   |
| 46                                    | PKG15516 | (Neuro-Spine /5 days) Dorsal Spinal Decompression                                              | 59,000.00   |
| 47                                    | PKG15517 | (Neuro-Spine /7 days) Lminectomy for Evacuation of Haematoma or Abscess without Fixation       | 50,000.00   |
| 48                                    | PKG15518 | (Neuro-Spine /7 days) Lminectomy for Evacuation of Haematoma or Abscess with Fixation          | 65,000.00   |
| 49                                    | PKG15519 | (Neuro-Spine /7 days) Laminectomy for Spinal Tumour                                            | 73,000.00   |
| 50                                    | PKG15520 | (Neuro-Spine/8 days) Laminectomy for Complex Spinal Tumour                                     | 80,000.00   |
| 51                                    | PKG15521 | (Neuro-Spine /3 days) Minimal Invasive Spinal Surgery for Spondylosis (MISS)                   | 62,000.00   |
| 52                                    | PKG15522 | (Neuro-Spine /5 days) Lumboperitoneal Shunt Insertion                                          | 40,000.00   |
| 53                                    | PKG15523 | (Neuro-Spine /5 days) Repair of Meningocele                                                    | 35,000.00   |
| 54                                    | PKG15524 | (Neuro-Spine /7 days) Repair of Myelomeningocele                                               | 40,000.00   |
| 55                                    | PKG15525 | (Neuro-Spine /5 days) Foramen Mgnum Decompression and Duraplasty for Chiari Malformation       | 60,000.00   |
| 56                                    | PKG15526 | (Neuro-Spine /2 days) Wound Debridement / 2ndary suture Deep L1                                | 13,000.00   |
| 57                                    | PKG15527 | (Neuro-Spine /2 days) Wound Debridement / 2ndary suture Deep L2                                | 15,000.00   |
| 58                                    | PKG15528 | (Neuro-Spine /2 days) Wound Debridement / 2ndary suture Deep L3                                | 20,000.00   |
| 59                                    | PKG15529 | (Neuro-Spine /1 day) Percutaneous Discectomy                                                   | 40,000.00   |
| <b>Clinical Services / Procedures</b> |          |                                                                                                |             |
| 1                                     | NSG0001  | (Neuro-Spine/xxx) Lumbar Drain Insertion                                                       | 8,000.00    |

| <b>NURSING</b>                        |         |                                                                |            |
|---------------------------------------|---------|----------------------------------------------------------------|------------|
| <b>Clinical Services / Procedures</b> |         |                                                                |            |
| 1                                     | NUR0001 | Cord Blood Collection                                          | 500.00     |
| 2                                     | NUR0002 | Early Pregnancy Class                                          | 400.00     |
| 3                                     | NUR0003 | Father Class                                                   | 400.00     |
| 4                                     | NUR0004 | Nursing Services (Home Care) Per Hour                          | 500.00     |
| 5                                     | NUR0005 | Nursing Services (Home Care) - 6 to 12 Hours                   | 1,800.00   |
| 6                                     | NUR0006 | Nursing Services (Home Care) - Per Day                         | 3,200.00   |
| 7                                     | NUR0007 | Nursing Services (Home Care) - Per Week                        | 21,000.00  |
| 8                                     | NUR0008 | Nursing Services (Home Care) - Per Month                       | 88,000.00  |
| 9                                     | NUR0009 | Nursing Services (Nurse accompanying guest abroad) - Per Day   | 4,200.00   |
| 10                                    | NUR0010 | Nursing Services (Nurse accompanying guest abroad) - Per Week  | 28,000.00  |
| 11                                    | NUR0011 | Nursing Services (Nurse accompanying guest abroad) - Per Month | 115,000.00 |
| 12                                    | NUR0012 | Nurse Home Visit (off duty hours)                              | 150.00     |
| 13                                    | NUR0013 | Antenatal Class (One session, 1.5 hours each)                  | 400.00     |
| 14                                    | NUR0014 | Antenatal Special Cls (one-on-one, one session, 1.5 hours)     | 800.00     |
| 15                                    | NUR0015 | Antenatal Class Package (Six sessions, 2.0 hours each)         | 1,800.00   |

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# AL-AHLI HOSPITAL PRICE LIST

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Date: 12-Feb-17

| SR | CODE    | DESCRIPTION                                                                | PRICE (QAR) |
|----|---------|----------------------------------------------------------------------------|-------------|
| 16 | NUR0016 | Antenatal Special Class Package (one-on-one, five sessions 1.5 hours each) | 2,400.00    |
| 17 | SRV0064 | Preconception Class                                                        | 280.00      |

## OBSTETRICS & GYNECOLOGY

### Packages

|    |          |                                                                                  |           |
|----|----------|----------------------------------------------------------------------------------|-----------|
| 1  | PKG05001 | (Obgyn / 02-Days) Mc Donald suture                                               | 6,525.00  |
| 2  | PKG05002 | (Obgyn / 01-Day) Laparoscopy (not for infertility investigation)                 | 7,625.00  |
| 3  | PKG05003 | (Obgyn / 01-Day) Polypectomy curettage                                           | 4,212.50  |
| 4  | PKG05004 | (Obgyn / 01-Day) Excision of bartholin cyst                                      | 6,550.00  |
| 5  | PKG05005 | (Obgyn / 01-Day) Marsupialisation of bartholin cyst                              | 6,050.00  |
| 6  | PKG05006 | (Obgyn / D Case) Hysteroscopy                                                    | 3,800.00  |
| 7  | PKG05007 | (Obgyn / 02-Days) Cervical/ Vaginal/ Perineal Repair                             | 7,600.00  |
| 8  | PKG05008 | (Obgyn / 02-Days) Manual removal of placenta                                     | 4,625.00  |
| 9  | PKG05009 | (Obgyn / 01-Day) Evacuation of vulvar haematoma                                  | 5,550.00  |
| 10 | PKG05010 | (Obgyn / 01-Day) Excision of lesion of vagina (warts/cysts)                      | 5,300.00  |
| 11 | PKG05011 | (Obgyn / D Case) D&C                                                             | 3,725.00  |
| 12 | PKG05012 | (Obgyn / D Case) Colposcopy under GA                                             | 4,950.00  |
| 13 | PKG05013 | (Obgyn / D Case) Electrical cauterization under GA                               | 3,912.50  |
| 14 | PKG05014 | (Obgyn / 01-Day) Incision of introlitus                                          | 3,675.00  |
| 15 | PKG05015 | (Obgyn / 02-Days) Extended episiotomy repair under GA                            | 7,250.00  |
| 16 | PKG05016 | (Obgyn / 01-Day) Cone biopsy of cervix                                           | 5,362.50  |
| 17 | PKG05017 | (Obgyn / D Case) Transvaginal aspiration                                         | 2,312.50  |
| 18 | PKG05018 | (Obgyn / 01-Day) Examination under GA                                            | 4,562.50  |
| 19 | PKG05019 | (Obgyn / 01-Day) Posterior colpoperineorrhaphy                                   | 8,650.00  |
| 20 | PKG05020 | (Obgyn / 03-Days) Ant. + post. Colpoperineorrhaphy                               | 14,475.00 |
| 21 | PKG05021 | (Obgyn / 02-Days) Anterior colpoperineorrhaphy                                   | 9,200.00  |
| 22 | PKG05022 | (Obgyn / 02-Days) Ovarian cystectomy                                             | 12,325.00 |
| 23 | PKG05023 | (Obgyn / 04-Days) Vento-Suspension                                               | 10,975.00 |
| 24 | PKG05024 | (Obgyn / 03-Days) Salpingectomy / Salpingostomy                                  | 12,275.00 |
| 25 | PKG05025 | (Obgyn / 02-Days) Laparoscopic tubal ligation                                    | 8,850.00  |
| 26 | PKG05026 | (Obgyn / 03-Days) Mini Laparotomy tubal ligation                                 | 10,050.00 |
| 27 | PKG05027 | (Obgyn / 02-Days) Excision of tubal (ectopic) pregnancy                          | 11,450.00 |
| 28 | PKG05028 | (Obgyn / 05-Days) Hysterectomy (vag. or abd.)                                    | 20,962.50 |
| 29 | PKG05029 | (Obgyn / 05-Days) Total abd. Hysterectomy with BSO                               | 20,962.50 |
| 30 | PKG05030 | (Obgyn / 05-Days) Total abd. Hysterectomy without BSO                            | 20,825.00 |
| 31 | PKG05031 | (Obgyn / 05-Days) Vag. Hysterectomy plus ant/post. Repair                        | 20,812.50 |
| 32 | PKG05032 | (Obgyn / 04-Days) Myomectomy abdominal                                           | 19,612.50 |
| 33 | PKG05033 | (Obgyn / 05-Days) Repair of Rectovaginal Fistula                                 | 16,175.00 |
| 34 | PKG05034 | (Obgyn / D Case) Cervical Cauterization                                          | 4,012.50  |
| 35 | PKG05035 | (Obgyn / 01-Day) Cauterization of Vaginal Warts                                  | 5,650.00  |
| 36 | PKG05036 | (Obgyn / 04-Days) Laparotomy - Rupture Uterine C.S. Scar                         | 19,612.50 |
| 37 | PKG05037 | (Obgyn / D Case) Removal of IUD                                                  | 1,550.00  |
| 38 | PKG05038 | (Obgyn / D Case) Insertion of IUCD                                               | 2,675.00  |
| 39 | PKG05039 | (Obgyn / D Case) Correction of Episiotomy                                        | 7,050.00  |
| 40 | PKG05040 | (Obgyn / 06-Days) Treatment of ovarian cancer (Adnexectomy, abd. Hysterectomy, A | 26,050.00 |
| 41 | PKG05041 | (Obgyn / 01-Day) Operative Hysteroscopy with fibroidectomy                       | 9,737.50  |
| 42 | PKG05042 | (Obgyn / D Case) Removal of Sutures (Shirodkar or McDonald) L A                  | 2,150.00  |
| 43 | PKG05043 | (Obgyn / 02-Days) Normal delivery                                                | 9,150.00  |
| 44 | PKG05044 | (Obgyn / 02 Days) Normal Delivery - Twin babies                                  | 11,900.00 |
| 45 | PKG05045 | (Obgyn / 02-Days) Assisted (vacuum/forceps) delivery                             | 10,150.00 |
| 46 | PKG05046 | (Obgyn / 04-Days) Caesarean Section                                              | 17,787.50 |
| 47 | PKG05047 | (Obgyn / 05-Days) Caesarean Section twins                                        | 21,525.00 |
| 48 | PKG05048 | (Obgyn / 05-Days) Caesarean Section triplets                                     | 24,662.50 |

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|---------------------------------------|----------|---------------------------------------------------------------|-------------|
| 49                                    | PKG05049 | (Obgyn / 02-Days) IUFD Delivery                               | 9,800.00    |
| 50                                    | PKG05050 | (Obgyn) Tubal Ligation                                        | 3,000.00    |
| 51                                    | PKG05051 | (Obgyn) Insertion of Bakri Balloon under GA                   | 7,000.00    |
| 52                                    | PKG05052 | (Obgyn / 01-Day) Douglas pouch abscess drainage               | 4,012.50    |
| 53                                    | PKG05053 | (Obgyn / 02-Days) Endometrial Ablation                        | 10,825.00   |
| 54                                    | PKG05054 | (Obgyn / 01-Day) Cervical trachelorraphy                      | 5,012.50    |
| 55                                    | PKG05055 | (Obgyn / 01-Day) Amputation of cervix                         | 6,162.50    |
| 56                                    | PKG05056 | (Obgyn / 02-Days) Manchester repair                           | 12,575.00   |
| 57                                    | PKG05057 | (Obgyn / 04-Days) Abdominal Sling for prolapsed               | 12,125.00   |
| 58                                    | PKG05058 | (Obgyn / 04-Days) Fothergill Operation                        | 16,225.00   |
| 59                                    | PKG05059 | (Obgyn / 01-Day) Diag. Laparoscopy + dye test                 | 10,837.50   |
| 60                                    | PKG05060 | (Obgyn / 02-Days) Operative Laparoscopy                       | 16,325.00   |
| 61                                    | PKG05061 | (Obgyn / 02-Days) Operative Hysteroscopy                      | 18,475.00   |
| 62                                    | PKG05062 | (Obgyn / D Case) External Cephalic Version                    | 3,550.00    |
| 63                                    | PKG05063 | (Obgyn / D Case) Intra Uterine Insemination                   | 4,150.00    |
| 64                                    | PKG05064 | (Obgyn / 01-Day) Laparoscopic Ovarian Drilling                | 10,675.00   |
| 65                                    | PKG05065 | (Obgyn / D Case) I&D of Perineal Abscess                      | 4,350.00    |
| 66                                    | PKG05066 | (Obgyn / D Case) Vaginal Dilatation                           | 4,350.00    |
| 67                                    | PKG05067 | (Obgyn / 01-Day) Labiaplasty/Refashioning of Labia            | 10,675.00   |
| 68                                    | PKG05068 | (Obgyn / 05-Days) Laparoscopic Hysterectomy                   | 26,200.00   |
| 69                                    | PKG05069 | (Obgyn / 05-Days) Laparoscopic Myomectomy                     | 22,025.00   |
| 70                                    | PKG05070 | (Obgyn / D Case) Removal of Sub Dermal Implant under LA       | 3,550.00    |
| 71                                    | PKG05071 | (Obgyn / 01-Day) Exploration of Uterus                        | 4,850.00    |
| 72                                    | PKG05072 | (Obgyn) Omentectomy                                           | 3,650.00    |
| 73                                    | PKG05073 | (Obgyn / 01-Day) Fenton's Operation                           | 6,925.00    |
| 74                                    | PKG05074 | (Obgyn) Adhesiolysis (Open)                                   | 9,950.00    |
| 75                                    | PKG05075 | (Obgyn / 03-Days) Laparotomy, Ectopic Pregnancy Removal       | 13,075.00   |
| 76                                    | PKG05076 | (Obgyn / 02-Days) Vacuum Delivery + Stand By C/S              | 12,550.00   |
| 77                                    | PKG05077 | (Obgyn / 01-Day) Refashioning of Female Circumcision          | 8,175.00    |
| 78                                    | PKG05078 | (Obgyn / D Case) Suture Removal under GA                      | 3,550.00    |
| 79                                    | PKG05079 | (Obgyn / D Case) Removal of 2nd Trimester Placenta by Suction | 6,225.00    |
| 80                                    | PKG05080 | (Obgyn / 01-Day) Laparoscopic Removal of Missed Loop          | 10,500.00   |
| 81                                    | PKG05081 | (Obgyn / 01-Day) Hysteroscopic Removal of Missed Loop         | 6,425.00    |
| 82                                    | PKG05082 | (Obgyn / 04-Days) Hysterotomy                                 | 17,788.00   |
| <b>Clinical Services / Procedures</b> |          |                                                               |             |
| 1                                     | SRV0012  | Cervical Biopsy W/ Local Anaesthesia                          | 310.00      |
| 2                                     | SRV0013  | Cervical Electrocautery                                       | 220.00      |
| 3                                     | SRV0014  | Cervical Paracervical Block                                   | 110.00      |
| 4                                     | SRV0015  | Cervical Paracervical Block W/ Local Anaesthesia              | 260.00      |
| 5                                     | SRV0016  | Cervical Polypectomy                                          | 110.00      |
| 6                                     | SRV0017  | Cervical Polypectomy W/ Local Anaesthesia                     | 260.00      |
| 7                                     | SRV0022  | Depo Provera                                                  | 60.00       |
| 8                                     | SRV0046  | IUCD Insertion - patient to buy IUCD separately               | 220.00      |
| 9                                     | SRV0047  | IUCD Removal                                                  | 60.00       |
| 10                                    | SRV0096  | CTG - 30 mins                                                 | 150.00      |
| 11                                    | SRV0097  | CTG - < 30 mins Prolonged                                     | 250.00      |

| <b>OPHTHALMOLOGY</b> |          |                             |          |
|----------------------|----------|-----------------------------|----------|
| <b>Packages</b>      |          |                             |          |
| 1                    | PKG06001 | (OPT) Corneal cross linking | 4,350.00 |
| 2                    | PKG06002 | (OPT) Relaxing Incisions    | 4,350.00 |
| 3                    | PKG06003 | (OPT) Clear Lens Extraction | 8,750.00 |
| 4                    | PKG06004 | (OPT) INTACS                | 7,050.00 |

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Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                                                     | PRICE (QAR) |
|----|----------|---------------------------------------------------------------------------------|-------------|
| 5  | PKG06005 | (OPT) LASIK + automated microkeratome                                           | 8,750.00    |
| 6  | PKG06006 | (OPT) LASIK + automated microkeratome + wavefront guided                        | 10,450.00   |
| 7  | PKG06007 | (OPT) LASIK + femtosecondlaser                                                  | 12,950.00   |
| 8  | PKG06008 | (OPT) Phakic IOL Intraocular Lens                                               | 8,750.00    |
| 9  | PKG06009 | (OPT) PRK (Photorefractive Keratectomy)                                         | 7,050.00    |
| 10 | PKG06010 | (OPT) Refractive cataract Surgery                                               | 8,750.00    |
| 11 | PKG06011 | (OPT) 65772 Correction Of Astigmatism-Crnl Relax Inc Corj Induced Astigmatism   | 4,400.00    |
| 12 | PKG06012 | (OPT) 66990 Ophthalmic Endoscope Add-On-Use Oph Endoscope                       | 1,000.00    |
| 13 | PKG06013 | (OPT) 67220 Treatment Of Choroid Lesion - Add On-Dstrj Les Choroid Pc 1 Sess    | 1,500.00    |
| 14 | PKG06014 | (OPT) 67225 Eye Photodynamic Ther Add-On-Dstrj Les Choroid Pdt 2Nd Eye 1 Sess   | 800.00      |
| 15 | PKG06015 | (OPT) 67500 Inject / Treat Eye Socket - La-Retrobulbar Njx Med Spx              | 1,500.00    |
| 16 | PKG06016 | (OPT / 01-Day) 65755 Corneal Transplant-Keratoplasty Pentrg Pseudophakia        | 17,500.00   |
| 17 | PKG06017 | (OPT / 01-Day) 65756 Corneal Trnspl Endothelial-Keratoplasty Endothelial        | 14,900.00   |
| 18 | PKG06018 | (OPT / 01-Day) 65900 Remove Eye Lesion-Rmvl Epithelial Downgrowth Ant Chamber E | 17,000.00   |
| 19 | PKG06019 | (OPT / 01-Day) 65920 Remove Implant Of Eye-Rmvl Implnted MatrI Ant Sgm Eye      | 9,900.00    |
| 20 | PKG06020 | (OPT / 01-Day) 66225 Repair / Graft Eye Lesion-Rpr ScII Staphyloma W / Grf      | 9,100.00    |
| 21 | PKG06021 | (OPT / 01-Day) 67043 Vitrectomy Pars Plana Remove Subretinal Membrane           | 15,500.00   |
| 22 | PKG06022 | (OPT / 01-Day) 67101 Repair Detached Retina 1 Sess Cryo / Diathermy + Drugs     | 7,600.00    |
| 23 | PKG06023 | (OPT / 01-Day) 67108 Repair Detached Retina-Rpr Rta Dchmnt W / Vtrc Any Meth    | 12,700.00   |
| 24 | PKG06024 | (OPT / 01-Day) 67113 Repair Complex Ret Detachm Pars Plana Vitrectomy& Memb Res | 17,500.00   |
| 25 | PKG06025 | (OPT / 01-Day) 67255 Reinforce / Graft Eye Wall-ScII Rnfcmt Spx W / Grf         | 6,500.00    |
| 26 | PKG06026 | (OPT / 01-Day) 67299 Eye Surgery Procedure-Unlis Post Sgm                       | 11,750.00   |
| 27 | PKG06027 | (OPT / 01-Day) 67414 Explore / Decompress Eye Socket W / O B1 Flap Rmvl         | 13,400.00   |
| 28 | PKG06028 | (OPT / 01-Day) 67445 Decompress Eye Socket- B1 Flap / Window Lat Rmvl B1        | 18,000.00   |
| 29 | PKG06029 | (OPT / 01-Day) 67570 Decompress Optic Nerve-Optic Nrv Dcmprn                    | 17,500.00   |
| 30 | PKG06030 | (OPT / 01-Day) 67599 Orbit Surgery Procedure-Unlis Orbit                        | 17,500.00   |
| 31 | PKG06031 | (OPT / 01-Day) 67973 Reconstruction Of Eyelid Full Thkns Tot Lwr 1 Stg          | 10,700.00   |
| 32 | PKG06032 | (OPT / 01-Day) 67974 Reconstruction Of Eyelid Full Thkns Tot Up 1 Stg           | 10,900.00   |
| 33 | PKG06033 | (OPT / D Case) 65093 Revise Eye With Implant-Evsc Oc Cnts W / Implt             | 8,800.00    |
| 34 | PKG06034 | (OPT / D Case) 65101 Removal Of Eye-Encl Eye W / O Implt                        | 9,100.00    |
| 35 | PKG06035 | (OPT / D Case) 65103 Enucleation Eye Implant Musc X Attached Implt              | 9,300.00    |
| 36 | PKG06036 | (OPT / D Case) 65105 Enucleation Eye Implt Musc Attached                        | 9,800.00    |
| 37 | PKG06037 | (OPT / D Case) 65125 Revise Ocular Implant W / Plmt / Rplcmt Pegs Spx           | 3,900.00    |
| 38 | PKG06038 | (OPT / D Case) 65130 Insert Oc Implt Sec After Evsc ScII Shell                  | 4,400.00    |
| 39 | PKG06039 | (OPT / D Case) 65135 Insert Ocular Implant After Encl Musc X Attached           | 4,400.00    |
| 40 | PKG06040 | (OPT / D Case) 65140 Attach Ocular Implant After Encl Musc Attached             | 4,100.00    |
| 41 | PKG06041 | (OPT / D Case) 65150 Revise Ocular Implant-Rinsj Oc Implt +CjncI Grf            | 5,400.00    |
| 42 | PKG06042 | (OPT / D Case) 65155 Reinsert Ocular Implant Rnfcmt & / Attach Musc             | 4,100.00    |
| 43 | PKG06043 | (OPT / D Case) 65175 Removal Of Ocular Implant-Rmvl Oc Implt                    | 4,400.00    |
| 44 | PKG06044 | (OPT / D Case) 65235 Remove Foreign Body From Ant Chamber Eye / Lens            | 9,300.00    |
| 45 | PKG06045 | (OPT / D Case) 65260 Remove Foreign Body Post Sgm Mag Xtrj Ant / Post Route     | 11,800.00   |
| 46 | PKG06046 | (OPT / D Case) 65265 Remove Foreign Body From Eye From Post Sgm Nonmag Xtrj     | 12,300.00   |
| 47 | PKG06047 | (OPT / D Case) 65270 Repair Of Eye Wound-Rpr Lac Cjnc +Nonprf8 Lac ScI Dir Clsr | 4,400.00    |
| 48 | PKG06048 | (OPT / D Case) 65272 Repair Of Laceration Conjunctival Moblj & Reargmt          | 4,400.00    |
| 49 | PKG06049 | (OPT / D Case) 65275 Repair Of Eye Wound-Rpr Lac Crn Nonprf8 +Rmvl Fb           | 4,600.00    |
| 50 | PKG06050 | (OPT / D Case) 65280 Repair Of Laceration Cornea & / ScI Prf8 X Invq Uveal Tiss | 6,500.00    |
| 51 | PKG06051 | (OPT / D Case) 65285 Repair Cornea / Scleral Perf W / Repos Uveal Tiss          | 6,600.00    |
| 52 | PKG06052 | (OPT / D Case) 65286 Repair Of Eye Wound-Rpr Lac Appl Tiss Glue Wnd Crn & / ScI | 6,550.00    |
| 53 | PKG06053 | (OPT / D Case) 65290 Repair Of Eye Socket Wound- Eo Muscle Tend / Tenons Caps   | 3,600.00    |
| 54 | PKG06054 | (OPT / D Case) 65400 Removal Of Eye Lesion-Exc Les Crn Xcp Pterygium            | 3,600.00    |
| 55 | PKG06055 | (OPT / D Case) 65410 Biopsy Of Cornea-Bx Crn                                    | 2,100.00    |
| 56 | PKG06056 | (OPT / D Case) 65420 Removal Of Eye Lesion-Exc / Trpos Pterygium W / O Grf      | 2,600.00    |
| 57 | PKG06057 | (OPT / D Case) 65426 Removal Of Eye Lesion-Exc / Trpos Pterygium W / Grf        | 5,000.00    |
| 58 | PKG06058 | (OPT / D Case) 65435 Curette / Treat Cornea-Rmvl Crnl Epithe +Chemocaut         | 2,100.00    |

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Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                     | PRICE (QAR) |
|-----|----------|---------------------------------------------------------------------------------|-------------|
| 59  | PKG06059 | (OPT / D Case) 65436 Curette / Treat Cornea Epithe W / Appl Chelating Agt       | 2,100.00    |
| 60  | PKG06060 | (OPT / D Case) 65600 Revision Of Cornea-Mlt Pnxrs Ant Crn                       | 2,100.00    |
| 61  | PKG06061 | (OPT / D Case) 65710 Corneal Transplant-Keratoplasty Anterior Lamellar          | 10,600.00   |
| 62  | PKG06062 | (OPT / D Case) 65730 Keratoplasty Penetrating Except Aphakia / Pseudophakia     | 10,600.00   |
| 63  | PKG06063 | (OPT / D Case) 65750 Corneal Transplant-Keratoplasty Pentrg Aphk                | 11,300.00   |
| 64  | PKG06064 | (OPT / D Case) 65757 Backbench Prepj Corneal Endothelial Allograft              | 7,050.00    |
| 65  | PKG06065 | (OPT / D Case) 65760 Revision Of Cornea-Keratomileusis                          | 12,500.00   |
| 66  | PKG06066 | (OPT / D Case) 65765 Revision Of Cornea-Keratophakia                            | 11,300.00   |
| 67  | PKG06067 | (OPT / D Case) 65767 Corneal Tissue Transplant-Epikeratoplasty                  | 11,300.00   |
| 68  | PKG06068 | (OPT / D Case) 65775 Correction Of Astigmatism- Wedge Resection                 | 4,100.00    |
| 69  | PKG06069 | (OPT / D Case) 65778 Place Amniotic Memb Ocular Surface Self Retain             | 12,300.00   |
| 70  | PKG06070 | (OPT / D Case) 65779 Place Amniotic Membrane Ocular Surface Sutured             | 12,300.00   |
| 71  | PKG06071 | (OPT / D Case) 65780 Ocular Surface Reconstruction Amniotic Membrane            | 12,300.00   |
| 72  | PKG06072 | (OPT / D Case) 65781 Ocular Surface Reconstruction Limbal Allograft             | 9,800.00    |
| 73  | PKG06073 | (OPT / D Case) 65782 Ocular Surface Reconstruction Limbal Autograft             | 9,800.00    |
| 74  | PKG06074 | (OPT / D Case) 65800 Drainage Of Eye-Pnts Eye Spx Dx Aspir Aqueous              | 2,100.00    |
| 75  | PKG06075 | (OPT / D Case) 65805 Drainage Of Eye-Pnts Eye Spx Ther Rls Aqueous              | 2,100.00    |
| 76  | PKG06076 | (OPT / D Case) 65810 Drainage Of Eye-Pnts Eye Spx Rmvl Vts & / Dscj Memb        | 4,100.00    |
| 77  | PKG06077 | (OPT / D Case) 65815 Drainage Of Eye-Pnts Eye Spx Rmvl Bld                      | 4,100.00    |
| 78  | PKG06078 | (OPT / D Case) 65850 Incision Of Eye-Trabeculotomy Ab Externo                   | 5,400.00    |
| 79  | PKG06079 | (OPT / D Case) 65865 Severing Adhesions Ant Sgm Incal Tq Spx Goniosynechia      | 2,100.00    |
| 80  | PKG06080 | (OPT / D Case) 65870 Severing Adhesions Ant Sgm Incal Spx Ant Synechia          | 2,100.00    |
| 81  | PKG06081 | (OPT / D Case) 65875 Severing Adhesions Ant Sgm Incal Spx Post Synechia         | 2,100.00    |
| 82  | PKG06082 | (OPT / D Case) 65930 Remove Blood Clot From Eye-Rmvl Bld Clot Ant Sgm Eye       | 7,050.00    |
| 83  | PKG06083 | (OPT / D Case) 66130 Remove Eye Lesion-Exc Les Scl                              | 2,100.00    |
| 84  | PKG06084 | (OPT / D Case) 66150 Glaucoma Surgery-Fstlj Scl Glc Treph Irdec                 | 8,050.00    |
| 85  | PKG06085 | (OPT / D Case) 66160 Filtrating Glaucoma Surger Sclrcy Punch / Scissors Irdec   | 8,050.00    |
| 86  | PKG06086 | (OPT / D Case) 66170 Glaucoma Surgery-Fstlj Scl Glc Trbec Ab Externo            | 7,000.00    |
| 87  | PKG06087 | (OPT / D Case) 66172 Incision Of Eye-Fstlj Scl Glc Trbec Ab Externo Scarring    | 6,900.00    |
| 88  | PKG06088 | (OPT / D Case) 66174 Translum Dilat Aqueous Canal W / O Dev / Stnt              | 7,050.00    |
| 89  | PKG06089 | (OPT / D Case) 66175 Trnslum Dilatation Aqueous Canal W / Dev / Stnt            | 11,800.00   |
| 90  | PKG06090 | (OPT / D Case) 66180 Implant Eye Shunt-Aqueous Shunt Eo Rsvr                    | 7,400.00    |
| 91  | PKG06091 | (OPT / D Case) 66185 Revise Eye Shunt-Revj Aqueous Shunt Eo Rsvr                | 4,400.00    |
| 92  | PKG06092 | (OPT / D Case) 66250 Follow-Up Surgery Of Eye-Revj / Rpr Oprative Wnd Ant Sgm   | 4,600.00    |
| 93  | PKG06093 | (OPT / D Case) 66500 Incision Of Iris-Iridotomy Stab Inc Spx Xcp Transfixion    | 2,600.00    |
| 94  | PKG06094 | (OPT / D Case) 66505 Incision Of Iris-Iridotomy Stab Inc Spx Transfixion        | 2,600.00    |
| 95  | PKG06095 | (OPT / D Case) 66600 Irdecotomy Cornea Sclera Les Removal                       | 5,500.00    |
| 96  | PKG06096 | (OPT / D Case) 66605 Removal Of Iris-Irdec Crnlsclrl / Crnl Sctj Cyclectomy     | 6,200.00    |
| 97  | PKG06097 | (OPT / D Case) 66625 Removal Of Iris-Irdec Crnlsclrl / Crnl Sctj Prph Glc Spx   | 5,000.00    |
| 98  | PKG06098 | (OPT / D Case) 66630 Removal Of Iris-Irdec Crnlsclrl / Crnl Sctj Sector Glc Spx | 5,500.00    |
| 99  | PKG06099 | (OPT / D Case) 66635 Removal Of Iris-Irdec Crnlsclrl / Crnl Sctj Optical Spx    | 5,500.00    |
| 100 | PKG06100 | (OPT / D Case) 66680 Repair Iris & Ciliary Body-Rpr Iris Ciliary Bdy            | 6,550.00    |
| 101 | PKG06101 | (OPT / D Case) 66682 Repair Iris & Ciliary Bodyspx Retrieval Sutr               | 7,050.00    |
| 102 | PKG06102 | (OPT / D Case) 66700 Destruction Ciliary Body-Ciliary Bdy Dstrj Dthrm           | 2,100.00    |
| 103 | PKG06103 | (OPT / D Case) 66710 Transsleral Cyclo Photocoagulation                         | 3,400.00    |
| 104 | PKG06104 | (OPT / D Case) 66711 Ciliary Endoscopic Ablation-Ciliary Bdy Dstrj Cyclopc Ndsc | 5,000.00    |
| 105 | PKG06105 | (OPT / D Case) 66720 Destruction Ciliary Body-Ciliary Bdy Dstrj Crtx            | 5,000.00    |
| 106 | PKG06106 | (OPT / D Case) 66740 Destruction Ciliary Body-Ciliary Bdy Dstrj Cyclodial       | 3,450.00    |
| 107 | PKG06107 | (OPT / D Case) 66762 Revision Of Iris-Iridoplasty Pc 1 Sess                     | 2,100.00    |
| 108 | PKG06108 | (OPT / D Case) 66770 Removal Of Intraocular Cyst / Iris / Cil Body              | 10,000.00   |
| 109 | PKG06109 | (OPT / D Case) 66820 Discission Sec Membranous Cataract Stab Inc                | 4,500.00    |
| 110 | PKG06110 | (OPT / D Case) 66825 Reposition Intraocular Lens                                | 5,500.00    |
| 111 | PKG06111 | (OPT / D Case) 66830 Removal Of Sec Membranous Cataract Corneo-Scl              | 6,000.00    |
| 112 | PKG06112 | (OPT / D Case) 66840 Removal Of Lens Material-Rmvl Lens Matrl Aspir Tq 1 Stgs   | 6,000.00    |

Director of Finance  
Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                     | PRICE (QAR) |
|-----|----------|---------------------------------------------------------------------------------|-------------|
| 113 | PKG06113 | (OPT / D Case) 66850 Removal Of Lens Material Phacofragmentation Aspir          | 9,800.00    |
| 114 | PKG06114 | (OPT / D Case) 66852 Removal Of Lens Matrl Pars Plna Appr +Vtrc                 | 8,000.00    |
| 115 | PKG06115 | (OPT / D Case) 66920 Extraction Of Lens-Rmvl Lens Matrl lcapsl                  | 7,500.00    |
| 116 | PKG06116 | (OPT / D Case) 66930 Removal Lens Material Intracapsular Dislocated Lens        | 8,000.00    |
| 117 | PKG06117 | (OPT / D Case) 66940 Extraction Of Lens-Rmvl Lens Matrl Xcapsl                  | 9,100.00    |
| 118 | PKG06118 | (OPT / D Case) 66982 Extracap Cataract Surg Complex Insj Lens Prosth 1 Stg      | 7,500.00    |
| 119 | PKG06119 | (OPT / D Case) 66983 Intracapsular Cataract And lo Lens Prosth 1 Stg            | 9,300.00    |
| 120 | PKG06120 | (OPT / D Case) 66984 Cataract Removal W / lol 1Stg                              | 6,500.00    |
| 121 | PKG06121 | (OPT / D Case) 66985 Insert Intraocular Lens Prosthesisx W / Cncrnt Rmvl        | 6,500.00    |
| 122 | PKG06122 | (OPT / D Case) 66986 Exchange Lens Prosthesis-Exchnng lo Lens                   | 6,000.00    |
| 123 | PKG06123 | (OPT / D Case) 66999 Eye Surgery Procedure-Unlis Ant Sgm Eye                    | 10,300.00   |
| 124 | PKG06124 | (OPT / D Case) 67005 Partial Removal Of Eye Fluid-Rmvl Vts Ant Appr Prtl Rmvl   | 4,100.00    |
| 125 | PKG06125 | (OPT / D Case) 67010 Part Removal Of Vts Ant Appr Stot Rmvl Vtrc                | 4,400.00    |
| 126 | PKG06126 | (OPT / D Case) 67015 Release Of Eye Fluid-Aspir / Rls Flu Pars Plna             | 3,100.00    |
| 127 | PKG06127 | (OPT / D Case) 67025 Replace Eye Fluid-Njx Vts Sub Pars Plna / Limbal Spx       | 2,600.00    |
| 128 | PKG06128 | (OPT / D Case) 67027 Implant Intravitreal Drug Dlvr Sys Pars Plana Rmvl Vts     | 11,300.00   |
| 129 | PKG06129 | (OPT / D Case) 67028 Injection Eye Drug-Intravitreal Njx Pharmacologic Agt Spx  | 2,100.00    |
| 130 | PKG06130 | (OPT / D Case) 67030 Incise Inner Eye Strands-Dscj Vts Strands Pars Plna        | 4,100.00    |
| 131 | PKG06131 | (OPT / D Case) 67036 Removal Of Inner Eye Fluid-Vtrc Mchnl Pars Plna            | 11,300.00   |
| 132 | PKG06132 | (OPT / D Case) 67038 Vitrectomy Pars Plana; W/ Epiretinal Membrane Peeling      | 12,300.00   |
| 133 | PKG06133 | (OPT / D Case) 67039 Laser Treatment Of Retina Pars Plna Focal Endolaser Pc     | 12,300.00   |
| 134 | PKG06134 | (OPT / D Case) 67040 Laser Treatment Of Retina Pars Plana Endolaser Panretinal  | 12,300.00   |
| 135 | PKG06135 | (OPT / D Case) 67041 Vitrectomy Pars Plana Remove Preretinal Membrane           | 12,300.00   |
| 136 | PKG06136 | (OPT / D Case) 67042 Vitrectomy Pars Plana Remove Int Memb Retina Mac Hole      | 12,300.00   |
| 137 | PKG06137 | (OPT / D Case) 67105 Repair Detached Retina 1 Sess Pc +Drg Subrta               | 10,300.00   |
| 138 | PKG06138 | (OPT / D Case) 67107 Repair Detached Retina Scleral Buckle + Implt              | 10,600.00   |
| 139 | PKG06139 | (OPT / D Case) 67110 Repair Detached Retina-Rpr Rta Dtchmnt Njx Air / Oth Gas   | 6,000.00    |
| 140 | PKG06140 | (OPT / D Case) 67112 Rerepair Detached Retina Scl Buckle / Pp Vitrectomy        | 10,000.00   |
| 141 | PKG06141 | (OPT / D Case) 67115 Release Encircling Material-Rls Encircling Matrl           | 2,600.00    |
| 142 | PKG06142 | (OPT / D Case) 67120 Remove Eye Implant Material-Rmvl Implted Matrl Post Sgm Eo | 7,000.00    |
| 143 | PKG06143 | (OPT / D Case) 67121 Remove Eye Implant Material-Rmvl Implted Matrl Post Sgm lo | 7,500.00    |
| 144 | PKG06144 | (OPT / D Case) 67141 Treatment Of Retina W / O Drg 1 Sess Cryo / Diathermy      | 5,400.00    |
| 145 | PKG06145 | (OPT / D Case) 67145 Treatment Of Retina-Proph Rta Dtchmnt W / O Drg 1 Sess     | 4,400.00    |
| 146 | PKG06146 | (OPT / D Case) 67208 Treatment Of Retinal Lesion 1 Sess Cryo / Diathermy        | 2,600.00    |
| 147 | PKG06147 | (OPT / D Case) 67210 Treatment Of Ret Lesion Localized 1 Sess Coag              | 2,600.00    |
| 148 | PKG06148 | (OPT / D Case) 67218 Treatment Of Retinal Lesion Under La 1 Sess Radj Impltj    | 4,900.00    |
| 149 | PKG06149 | (OPT / D Case) 67227 Destruction Retinopathy 1 Sess Diathermy                   | 2,100.00    |
| 150 | PKG06150 | (OPT / D Case) 67250 Reinforce Eye Wall-Scll Rnfcmt Spx W / O Grf               | 3,100.00    |
| 151 | PKG06151 | (OPT / D Case) 67311 Strabismus Recession / Rescj 1 Hrzntl Musc                 | 4,400.00    |
| 152 | PKG06152 | (OPT / D Case) 67312 Strabismus Recession / Rescj 2 Hrzntl Muscles              | 5,400.00    |
| 153 | PKG06153 | (OPT / D Case) 67314 Revise Eye Muscle-Strabismus Recession / Rescj 1 Ver Musc  | 4,400.00    |
| 154 | PKG06154 | (OPT / D Case) 67316 Strabismus Recession / Rescj 2 Muscles/ More Ver Musc      | 5,400.00    |
| 155 | PKG06155 | (OPT / D Case) 67318 Revise Eye Muscle(S)-Strabismus Any Suprior Oblq Musc      | 5,400.00    |
| 156 | PKG06156 | (OPT / D Case) 67320 Revise Eye Muscle(S) Add-On-Trpos Any Eo Musc              | 6,400.00    |
| 157 | PKG06157 | (OPT / D Case) 67331 Follow-Up Add-On-Strab Surgery Prev Eye X Involve Eo Musc  | 5,900.00    |
| 158 | PKG06158 | (OPT / D Case) 67332 Rerevise Eye Muscles Eo Musc / Rstcv Myopathy              | 10,800.00   |
| 159 | PKG06159 | (OPT / D Case) 67334 Strabismus Post Fixj Sutr Tq + Muscle Recession            | 6,900.00    |
| 160 | PKG06160 | (OPT / D Case) 67335 Eye Suture During Surgery-Plmt Adjustable Sutr Strabismus  | 2,100.00    |
| 161 | PKG06161 | (OPT / D Case) 67340 Revise Eye Muscle Add-On-Strab Expl/ Rpr Detach Eo Musc    | 5,900.00    |
| 162 | PKG06162 | (OPT / D Case) 67343 Release Scar Tissue W / O Detaching Eo Musc Spx            | 5,900.00    |
| 163 | PKG06163 | (OPT / D Case) 67345 Destroy Nerve Of Eye Muscle-Chemodnrvtj Eo Musc            | 2,100.00    |
| 164 | PKG06164 | (OPT / D Case) 67346 Biopsy Eye Muscle-Biopsy Extraocular Muscle                | 2,100.00    |
| 165 | PKG06165 | (OPT / D Case) 67350 Biopsy Eye Muscle-Bx, Extraocular Muscle                   | 2,100.00    |
| 166 | PKG06166 | (OPT / D Case) 67399 Eye Muscle Surgery Procedure-Unlis Oc Musc                 | 4,400.00    |

Mustafa El-Ahwal (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital

Finance Department



# AL-AHLI HOSPITAL PRICE LIST

الاستشفاء الأهلي  
AL-AHLI HOSPITAL

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                    | PRICE (QAR) |
|-----|----------|--------------------------------------------------------------------------------|-------------|
| 167 | PKG06167 | (OPT / D Case) 67400 Explore / Biopsy Eye Socket-Orbt W / O B1 Flap Expl +Bx   | 4,900.00    |
| 168 | PKG06168 | (OPT / D Case) 67405 Explore / Drain Eye Socket-Orbt W / O B1 Flap Drg Only    | 4,900.00    |
| 169 | PKG06169 | (OPT / D Case) 67412 Explore / Treat Eye Socket-Orbt W / O B1 Flap Rmvl Les    | 9,800.00    |
| 170 | PKG06170 | (OPT / D Case) 67413 Explore / Treat Eye Socket-Orbt W / O B1 Flap Rmvl Fb     | 10,800.00   |
| 171 | PKG06171 | (OPT / D Case) 67415 Aspiration Orbital Contents-Fine Ndl Aspir Orb Cnts       | 3,900.00    |
| 172 | PKG06172 | (OPT / D Case) 67420 Expl Treat Eye Socket-Orbt B1 Flap / Window Lat Rmvl Les  | 11,400.00   |
| 173 | PKG06173 | (OPT / D Case) 67430 Treat Eye Socket-Orbt B1 Flap / Window Lat Rmvl Fb        | 13,800.00   |
| 174 | PKG06174 | (OPT / D Case) 67440 Explore / Drain Eye Socket-Orbt B1 Flap / Window Lat Drg  | 10,900.00   |
| 175 | PKG06175 | (OPT / D Case) 67450 Explore / Biopsy Eye Socket- Orbt Flap/ Window Lat        | 10,400.00   |
| 176 | PKG06176 | (OPT / D Case) 67515 Inject / Treat Eye Socket Med / Other Tenons Capsule      | 2,100.00    |
| 177 | PKG06177 | (OPT / D Case) 67550 Insert Eye Socket Implant-Orb Implt Insj                  | 5,000.00    |
| 178 | PKG06178 | (OPT / D Case) 67560 Revise Eye Socket Implant-Orb Implt Rmvl / Revj           | 5,000.00    |
| 179 | PKG06179 | (OPT / D Case) 67808 Remove Chalazion Anes Req Hospization 1 / Mlt             | 4,300.00    |
| 180 | PKG06180 | (OPT / D Case) 67830 Revise Eyelashes-Corrj Trichiasis Inc Lid Mrgn            | 2,100.00    |
| 181 | PKG06181 | (OPT / D Case) 67835 Correct Trichiasis Inc Lid Mrgn W / Fr Muc Memb Grf       | 5,000.00    |
| 182 | PKG06182 | (OPT / D Case) 67840 Excision Lesion Eyelid W / O Clsr / W / Smpl Dir Clsr     | 2,100.00    |
| 183 | PKG06183 | (OPT / D Case) 67850 Treat Eyelid Lesion-Dstrj Les Lid Mrgn <1 Cm              | 2,100.00    |
| 184 | PKG06184 | (OPT / D Case) 67875 Closure Of Eyelid By Suture-Temp Clsr Eyelids Sutr        | 2,100.00    |
| 185 | PKG06185 | (OPT / D Case) 67880 Revision Of Eyelid-Constj Ads Median Trph / Ctrph         | 3,400.00    |
| 186 | PKG06186 | (OPT / D Case) 67882 Rev Of Eyelid-Constj Ads Median Trph / Ctrph Trpos Plate  | 3,400.00    |
| 187 | PKG06187 | (OPT / D Case) 67900 Repair Brow Defect-Rpr Brow Ptosis                        | 5,900.00    |
| 188 | PKG06188 | (OPT / D Case) 67901 Repair Lid Bpos Frontalis Muscle Sutr / Oth Matr          | 4,900.00    |
| 189 | PKG06189 | (OPT / D Case) 67902 Repair Eyelid Defect Frontalis Musc Autol Fscal Sling     | 6,400.00    |
| 190 | PKG06190 | (OPT / D Case) 67903 Repair Eyelid Defect-Rpr Bpos Levator Rescj / Advmnt Int  | 5,900.00    |
| 191 | PKG06191 | (OPT / D Case) 67904 Repair Eyelid Defect Levator Rescj / Advmnt Xtrnl         | 5,900.00    |
| 192 | PKG06192 | (OPT / D Case) 67906 Repair Eyelid Defect-Rpr Bpos Suprior Rectus Fscal Sling  | 5,900.00    |
| 193 | PKG06193 | (OPT / D Case) 67908 Conjunctivo-Tarso-Muscle-Levator Resection                | 5,900.00    |
| 194 | PKG06194 | (OPT / D Case) 67909 Revise Eyelid Defect-Rdctj >Corrj Ptosis                  | 4,400.00    |
| 195 | PKG06195 | (OPT / D Case) 67911 Revise Eyelid Defect-Corrj Lid Retrctj                    | 4,400.00    |
| 196 | PKG06196 | (OPT / D Case) 67912 Correction Lagophthalmos Impltj Upr Eyelid Lid Load       | 3,400.00    |
| 197 | PKG06197 | (OPT / D Case) 67914 Repair Eyelid Defect-Rpr Ectropion Sutr                   | 3,900.00    |
| 198 | PKG06198 | (OPT / D Case) 67916 Repair Eyelid Defect-Rpr Ectropion Exc Tarsal Wedge       | 3,900.00    |
| 199 | PKG06199 | (OPT / D Case) 67917 Repair Eyelid Defect-Rpr Ectropion X10Sv                  | 3,900.00    |
| 200 | PKG06200 | (OPT / D Case) 67921 Repair Eyelid Defect-Rpr Entropion Sutr                   | 3,900.00    |
| 201 | PKG06201 | (OPT / D Case) 67923 Repair Eyelid Defect-Rpr Entropion Exc Tarsal Wedge       | 4,400.00    |
| 202 | PKG06202 | (OPT / D Case) 67924 Repair Eyelid Defect-Rpr Entropion X10Sv                  | 4,400.00    |
| 203 | PKG06203 | (OPT / D Case) 67930 Repair Eyelid Wound-Sutr Recent Wnd Eyelid Prtl Thkns     | 3,400.00    |
| 204 | PKG06204 | (OPT / D Case) 67935 Repair Eyelid Wound-Sutr Recent Wnd Eyelid Full Thkns     | 3,900.00    |
| 205 | PKG06205 | (OPT / D Case) 67938 Remove Eyelid Foreign Body-Rmvl Embedded Fb Eyelid        | 2,100.00    |
| 206 | PKG06206 | (OPT / D Case) 67950 Revision Of Eyelid-Canthoplasty                           | 3,400.00    |
| 207 | PKG06207 | (OPT / D Case) 67961 Revision Of Eyelid-Exc & Rpr Eyelid < One-4th Lid Mrgn    | 2,600.00    |
| 208 | PKG06208 | (OPT / D Case) 67966 Revision Of Eyelid-Exc & Rpr Eyelid > One-4th Lid Mrgn    | 4,400.00    |
| 209 | PKG06209 | (OPT / D Case) 67971 Reconstruction Of Eyelid Full Thickness < 2-3Rd 1 Stg     | 7,550.00    |
| 210 | PKG06210 | (OPT / D Case) 67975 Reconstruction Of Eyelid-Rcnstj Eyelid Full Thkns 2Nd Stg | 6,900.00    |
| 211 | PKG06211 | (OPT / D Case) 67999 Revision Of Eyelid-Unlis Eyelids                          | 7,050.00    |
| 212 | PKG06212 | (OPT / D Case) 68110 Remove Eyelid Lining Lesion-Exc Les Cjnc Up 1 Cm          | 2,100.00    |
| 213 | PKG06213 | (OPT / D Case) 68115 Remove Eyelid Lining Lesion-Exc Les Cjnc > 1 Cm           | 4,500.00    |
| 214 | PKG06214 | (OPT / D Case) 68130 Remove Eyelid Lining Lesion-Exc Les Cjnc W / Adj Scl      | 5,000.00    |
| 215 | PKG06215 | (OPT / D Case) 68135 Remove Eyelid Lining Lesion-Dstrj Les Cjnc                | 3,900.00    |
| 216 | PKG06216 | (OPT / D Case) 68320 Revise / Graft Eyelid Lining-Cjp Cjnc Grf / X10Sv Reargmt | 5,000.00    |
| 217 | PKG06217 | (OPT / D Case) 68325 Revise / Graft Eyelid Lining-Cjp Buccal Muc Memb Grf      | 8,050.00    |
| 218 | PKG06218 | (OPT / D Case) 68326 Reconstruction Cul-De-Sac Conjunctival Graft / Reargmt    | 9,600.00    |
| 219 | PKG06219 | (OPT / D Case) 68328 Reconstruction Cul-De-Sac Buccal Mucus Memb Graft         | 9,300.00    |
| 220 | PKG06220 | (OPT / D Case) 68330 Revise Eyelid Lining-Rpr Symblepharon Cjp W / O Grf       | 2,600.00    |

Mustafa El-Ahwal (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

المستشفى الأهلي  
AL-AHLI HOSPITAL

| SR                             | CODE     | DESCRIPTION                                                                    | PRICE (QAR) |
|--------------------------------|----------|--------------------------------------------------------------------------------|-------------|
| 221                            | PKG06221 | (OPT / D Case) 68335 Repair Symblepharon Fr Grf Cjnc / Buccal Muc Memb         | 10,300.00   |
| 222                            | PKG06222 | (OPT / D Case) 68340 Separate Eyelid Adhesions-Rpr Symblepharon Div            | 6,550.00    |
| 223                            | PKG06223 | (OPT / D Case) 68360 Revise Eyelid Lining-Cjnc Flap Bridge / Prtl Spx          | 5,000.00    |
| 224                            | PKG06224 | (OPT / D Case) 68362 Revise Eyelid Lining-Cjnc Flap Tot                        | 5,500.00    |
| 225                            | PKG06225 | (OPT / D Case) 68500 Removal Of Tear Gland-Exc Lacrimal Gnd Xcp Tum Prtl       | 5,900.00    |
| 226                            | PKG06226 | (OPT / D Case) 68500 Removal Of Tear Gland-Exc Lacrimal Gnd Xcp Tum Tot        | 5,900.00    |
| 227                            | PKG06227 | (OPT / D Case) 68510 Biopsy Of Tear Gland-Bx Lacrimal Gnd                      | 2,100.00    |
| 228                            | PKG06228 | (OPT / D Case) 68520 Removal Of Tear Sac-Exc Lacrimal Sac                      | 5,900.00    |
| 229                            | PKG06229 | (OPT / D Case) 68525 Biopsy Of Tear Sac-Bx Lacrimal Sac                        | 3,400.00    |
| 230                            | PKG06230 | (OPT / D Case) 68530 Clearance Of Tear Duct-Rmvl Fb / Dacryolith               | 2,100.00    |
| 231                            | PKG06231 | (OPT / D Case) 68540 Remove Tear Gland Lesion-Exc Lacrimal Gnd Tum Frnt Appr   | 5,900.00    |
| 232                            | PKG06232 | (OPT / D Case) 68550 Remove Tear Gland Lesion-Exc Lacrimal Gnd Tum Invg Osteom | 7,400.00    |
| 233                            | PKG06233 | (OPT / D Case) 68700 Repair Tear Ducts-Plstc Rpr Canaliculi                    | 2,600.00    |
| 234                            | PKG06234 | (OPT / D Case) 68720 Create Tear Sac Drain-Dacryocstorhinostomy                | 12,300.00   |
| 235                            | PKG06235 | (OPT / D Case) 68745 Create Tear Duct Drain                                    | 7,500.00    |
| 236                            | PKG06236 | (OPT / D Case) 68750 Conjunctivorhinostomy Insj Tube / Stent                   | 8,000.00    |
| 237                            | PKG06237 | (OPT / D Case) 68770 Close Tear System Fistula-Clsr Lacrimal Fstl Spx          | 2,600.00    |
| 238                            | PKG06238 | (OPT / D Case) 68811 Probe Nasolacrimal Duct-Probe Nasolacrimal Dux + Irrg An  | 2,100.00    |
| 239                            | PKG06239 | (OPT / D Case) 68815 Probe Nasolacrimal Ducts + Irrg Insj Tube / Stent         | 9,100.00    |
| 240                            | PKG06240 | (OPT / D Case) 68816 Probe Nasolacrimal Duct With Catheter Dilation            | 9,600.00    |
| 241                            | PKG06241 | (OPT / D Case) 68899 Tear Duct System Surgery-Unlrs Lacrimal Sys               | 3,400.00    |
| Clinical Services / Procedures |          |                                                                                |             |
| 1                              | OPT0001  | Aesthesiometry                                                                 | 20.00       |
| 2                              | OPT0002  | Anomaloscopy (color vision)                                                    | 300.00      |
| 3                              | OPT0003  | A-scan                                                                         | 250.00      |
| 4                              | OPT0004  | Autorefractometry, pupillary distance measurement                              | 100.00      |
| 5                              | OPT0005  | Biometry Ultrasound (Ocuscan RX)                                               | 50.00       |
| 6                              | OPT0006  | B-scan eye 3D                                                                  | 250.00      |
| 7                              | OPT0007  | B-scan eye special (20,50Hz)                                                   | 250.00      |
| 8                              | OPT0008  | B-scan eye standard (10Hz)                                                     | 250.00      |
| 9                              | OPT0009  | B-scan orbit                                                                   | 300.00      |
| 10                             | OPT0010  | Confocal corneal analysis (Confoscan)                                          | 500.00      |
| 11                             | OPT0011  | Dacryocystorhinography                                                         | 500.00      |
| 12                             | OPT0012  | Confocal endothelial biomicroscopy (HS EM 325)                                 | 200.00      |
| 13                             | OPT0013  | Dark adaptation, night vision                                                  | 200.00      |
| 14                             | OPT0014  | Exophthalmometry (Hertel)                                                      | 120.00      |
| 15                             | OPT0015  | Eyelid fissure measurement                                                     | 20.00       |
| 16                             | OPT0016  | Fluorescein / ICG angiography                                                  | 600.00      |
| 17                             | OPT0017  | Frequency doubling technology (FDT)                                            | 200.00      |
| 18                             | OPT0018  | Keratometry, autorefractometry                                                 | 100.00      |
| 19                             | OPT0019  | Lensmetry                                                                      | 100.00      |
| 20                             | OPT0020  | Microperimetry (MP1)                                                           | 1,020.00    |
| 21                             | OPT0021  | Multifocal electroretinography (mfERG)                                         | 1,000.00    |
| 22                             | OPT0022  | OCT Cirrus papillometry, nerv e fiber layer densitometry                       | 700.00      |
| 23                             | OPT0023  | OCT Cirrus (anterior chamber) gonimetry                                        | 400.00      |
| 24                             | OPT0024  | OCT Cirrus macula evaluation, central retinal thickness                        | 700.00      |
| 25                             | OPT0025  | Optical biometry (IOL master)                                                  | 200.00      |
| 26                             | OPT0026  | Pachymetry, optical                                                            | 50.00       |
| 27                             | OPT0027  | Pachymetry, ultrasound (Ocuscan RX)                                            | 100.00      |
| 28                             | OPT0028  | Pentacam contact lens fitting                                                  | 500.00      |
| 29                             | OPT0029  | Pentacam anterior segment evaluation ( aberrometry, pachymetry)                | 500.00      |
| 30                             | OPT0030  | Pentacam topography with keratoconus evaluation (Holladay)                     | 500.00      |
| 31                             | OPT0031  | Perimetry Humphrey with SITA evaluation standardized (visual fields) macula    | 600.00      |
| 32                             | OPT0032  | Perimetry-humphrey with SITA evaluation standardized glaucoma                  | 700.00      |

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# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

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AL-AHLI HOSPITAL

| SR | CODE    | DESCRIPTION                                                                    | PRICE (QAR) |
|----|---------|--------------------------------------------------------------------------------|-------------|
| 33 | OPT0033 | Perimetry Goldmann standardized neurological                                   | 500.00      |
| 34 | OPT0034 | Photodocumentation, Fundus stroke risk assessment                              | 250.00      |
| 35 | OPT0035 | Photodocumentation, anterior segment                                           | 150.00      |
| 36 | OPT0036 | Photodocumentation, Fundus macula assessment ( infrared, autofluorescence)     | 200.00      |
| 37 | OPT0037 | Pupillometry, Pentacam                                                         | 150.00      |
| 38 | OPT0038 | Refractometry                                                                  | 20.00       |
| 39 | OPT0039 | Retinoscopy                                                                    | 20.00       |
| 40 | OPT0040 | Standard Topography (Pentacam)                                                 | 200.00      |
| 41 | OPT0041 | Tonometry, Directional gaze                                                    | 300.00      |
| 42 | OPT0042 | Tonometry, Optical pachymetry-corrected                                        | 200.00      |
| 43 | OPT0043 | Visually evoked potentials (VEP)                                               | 1,000.00    |
| 44 | OPT0044 | Swab                                                                           | 100.00      |
| 45 | OPT0045 | Hess chart                                                                     | 300.00      |
| 46 | OPT0046 | ERG                                                                            | 1,000.00    |
| 47 | OPT0047 | EOG                                                                            | 1,000.00    |
| 48 | OPT0048 | Microperimetry (MP1)                                                           | 1,020.00    |
| 49 | OPT0049 | endothelial cell microscopy                                                    | 500.00      |
| 50 | OPT0050 | full cornea evaluation                                                         | 1,100.00    |
| 51 | OPT0051 | Pentacam lens densitometry                                                     | 200.00      |
| 52 | OPT0052 | Pentacam anterior segment evaluation (morphology of chamber angle etc)         | 200.00      |
| 53 | OPT0053 | Tear secretion Schirmer's test                                                 | 50.00       |
| 54 | OPT0054 | Amblyopia assessment                                                           | 200.00      |
| 55 | OPT0055 | Amsler grid test                                                               | 50.00       |
| 56 | OPT0056 | Best corrected visual acuity (BCVA)                                            | 400.00      |
| 57 | OPT0057 | Binocular vision status (Schober etc.)                                         | 100.00      |
| 58 | OPT0058 | CL fitting, non-therapeutic                                                    | 100.00      |
| 59 | OPT0059 | CL fitting, therapeutic                                                        | 100.00      |
| 60 | OPT0060 | Glare vision                                                                   | 50.00       |
| 61 | OPT0061 | Impression cytology test                                                       | 200.00      |
| 62 | OPT0062 | preOP cataract and refractive lens assessment (IOL master, OcuscanRX etc)      | 600.00      |
| 63 | OPT0063 | Pediatric visual acuity (Crawford drum or similar)                             | 100.00      |
| 64 | OPT0064 | preOP refractive surgery assessment (biograph, oculizer etc)                   | 1,000.00    |
| 65 | OPT0065 | Ptosis / eyelid assessment                                                     | 100.00      |
| 66 | OPT0066 | Pupillary reaction test, pupillometry                                          | 50.00       |
| 67 | OPT0067 | Quality of vision, glare vision                                                | 200.00      |
| 68 | OPT0068 | Tear film interference test                                                    | 50.00       |
| 69 | OPT0069 | Tear film mucin phase Bengal rose test                                         | 100.00      |
| 70 | OPT0070 | Uncorrected visual acuity (UCVA)                                               | 50.00       |
| 71 | OPT0071 | 3 Mirror examination of retina, gonioscopy                                     | 250.00      |
| 72 | OPT0072 | Indirect ophthalmoscopy                                                        | 250.00      |
| 73 | OPT0073 | Orthoptic evaluation (Hess screen etc)                                         | 1,000.00    |
| 74 | OPT0074 | Glaucoma risk assessment software for perimetry                                | 150.00      |
| 75 | OPT0075 | Cycloplegic refraction                                                         | 120.00      |
| 76 | OPT0076 | Slitlamp biomicroscopy                                                         | 50.00       |
| 77 | OPT0077 | visual acuity testing with ETDRS charts                                        | 400.00      |
| 78 | OPT0078 | Meibomianoscopy                                                                | 150.00      |
| 79 | OPT0079 | Diabetes: ETDRS,VFA,IOP,FDT,OCT,FAG,ECC,stroke risk,1 follow-up over 6 months  | 1,250.00    |
| 80 | OPT0080 | Optic Nerve: BCVA,VFA,IOP,VF-SITA,VEP,OCT, 1 follow-up over 2 years            | 1,300.00    |
| 81 | OPT0081 | Hypertension:BCVA,VFA,IOP,VF-SITA,stroke risk, OCT, 1 follow-up over 6 months  | 1,100.00    |
| 82 | OPT0082 | Glaucoma: BCVA,VFA,IOP,VF-SITA,ECC,FDT,OCT, 3 follow-ups over 2 years          | 1,200.00    |
| 83 | OPT0083 | Retina: BCVA,VFA,IOP,VF-SITA,FAG,mfERG,OCT, 1 follow-up over 6 months          | 1,150.00    |
| 84 | OPT0084 | Macula: BCVA,VFA,IOP,VF-SITA,OCT, FDT,FAG,mfERG, 1 follow-up over 6 months     | 1,250.00    |
| 85 | OPT0085 | Keratoconus:BCVA,VFA,IOP,VF-SITA,OCT,IOLMaster,ECC,Pentacam, 2 follow-ups 1 yr | 1,200.00    |
| 86 | OPT0086 | Cataract: BCVA,VFA,IOP,VF,Pentacam,ECC,IOLMaster,3 follow-ups over 2 years     | 950.00      |

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|-----|---------|--------------------------------------------------------------------------------|-------------|
| 87  | OPT0087 | Pterygium: BCVA,VFA,IOP,Pentacam,3 follow-ups over 2 years                     | 500.00      |
| 88  | OPT0088 | Pediatric/orthoptic: BCVA,orthoptic status,Pentacam                            | 1,000.00    |
| 89  | OPT0089 | Low vision:BCVA,ETDRS,VFA,IOP,VF,SITA,FDT,OCT,FAG,IOLMaster,1 follow-up 1yr    | 1,500.00    |
| 90  | OPT0090 | Com - OCT(Cirrus HD, 5.2 software): Macula and/or Optic Disk                   | 950.00      |
| 91  | OPT0091 | Com - Pentacam HR: Cornea and/or Lens Analysis                                 | 600.00      |
| 92  | OPT0092 | Com - Perimetry (Humphrey 750-I, SITA SWAP): Glaucoma, Macula, Kinetic         | 900.00      |
| 93  | OPT0093 | Com - FDT: Macula and/or Glaucoma                                              | 250.00      |
| 94  | OPT0094 | Com - FAG (FF450plus IR): Autofluorescence, IR, FA, Stroke Risk                | 950.00      |
| 95  | OPT0095 | Com - Multifocal Electroretinography (RolandConsult): (mf)ERG, (mf)VEP, EOG    | 950.00      |
| 96  | OPT0096 | Com - FVA (Stereo Optical): ANSI Stereopsis, Glare, Contrast, Color            | 250.00      |
| 97  | OPT0097 | Com - Anomaloscopy (Oculus HMC): Quantitative Color Vision                     | 350.00      |
| 98  | OPT0098 | Com - Endothelial Cell Microscopy (Topcon SP3000P): Count and Morphology       | 750.00      |
| 99  | OPT0099 | Com - A,B-scan (Tomey UD 6000): Echography 10/20Hz                             | 300.00      |
| 100 | OPT0100 | Com - IOL Master (Zeiss 500): IOL Assessment for all current IOLs              | 300.00      |
| 101 | OPT0101 | OPD - Release Encircling Material                                              | 1,150.00    |
| 102 | OPT0102 | OPD - Remove Eyelid Lesions                                                    | 1,350.00    |
| 103 | OPT0103 | 65205 - Remove Foreign Body From Eye-Rmvl Fb Xtrnl Eye Cjnc Supfc              | 500.00      |
| 104 | OPT0104 | 65210 - Remove Foreign Body From Extrnl Eye Conjunctiva / Sclera               | 500.00      |
| 105 | OPT0105 | 65222 - Remove Foreign Body From Eye-Rmvl Fb Xtrnl Eye Crnl W / Slit Lamp      | 500.00      |
| 106 | OPT0106 | 65430 - Corneal Smear-Cornea Scraping Diagnostic Smear & / Culture             | 350.00      |
| 107 | OPT0107 | 65772 - Correction Of Astigmatism-Crnl Relaxing Inc Corj Induced Astigmatism   | 5,000.00    |
| 108 | OPT0108 | 65775 - Correction Of Astigmatism-Crnl Wedge Rescj Corj Induced Astigmatism    | 5,000.00    |
| 109 | OPT0109 | 65805 - Drainage Of Eye-Pnts Eye Spx Ther Rls Aqueous                          | 500.00      |
| 110 | OPT0110 | 65855 - Laser Surgery Of Eye-Trabeculoplasty Laser Surg 1 Sess                 | 900.00      |
| 111 | OPT0111 | 65860 - Incise Inner Eye Adhesions-Severing Ads Ant Sgm Laser Tq Spx           | 850.00      |
| 112 | OPT0112 | 66020 - Injection Treatment Of Eye-Njx Ant Chamber Eye Spx Air / Liq           | 850.00      |
| 113 | OPT0113 | 66030 - Injection Treatment Of Eye-Njx Ant Chamber Eye Spx Med                 | 850.00      |
| 114 | OPT0114 | 66130 - Remove Eye Lesion-Exc Les Scl                                          | 1,500.00    |
| 115 | OPT0115 | 66761 - Revision Of Iris-Iridotomy / Irdec Laser Surg Per Session              | 900.00      |
| 116 | OPT0116 | 66821 - After Cataract Laser Surgery-Post-Cataract Laser Surgery               | 1,500.00    |
| 117 | OPT0117 | 67031 - Laser Surgery Eye Strands-Severing Vts Strands Laser 1 Stgs            | 850.00      |
| 118 | OPT0118 | 67221 - Ocular Photodynamic Ther-Dstrj Les Choroid Pdt                         | 850.00      |
| 119 | OPT0119 | 67228 - Photocoagulation Extensive Retinopathy 1 Sess                          | 2,000.00    |
| 120 | OPT0120 | 67229 - Tr Retinal Les Preterm Inf-Extensive Retinopathy 1 Sess Preterm Infant | 3,500.00    |
| 121 | OPT0121 | 67700 - Drainage Of Eyelid Abscess-Blepharotomy Drg Absc Eyelid                | 1,000.00    |
| 122 | OPT0122 | 67710 - Incision Of Eyelid-Severing Tarsorrhaphy                               | 1,500.00    |
| 123 | OPT0123 | 67715 - Incision Of Eyelid Fold-Canthotomy Spx                                 | 1,500.00    |
| 124 | OPT0124 | 67800 - Remove Eyelid Lesion-Exc Chalazion 1                                   | 800.00      |
| 125 | OPT0125 | 67801 - Remove Eyelid Lesions-Exc Chalazion Mlt Sm Lid                         | 1,000.00    |
| 126 | OPT0126 | 67810 - Biopsy Of Eyelid-Bx Eyelid                                             | 800.00      |
| 127 | OPT0127 | 67820 - Revise Eyelashes-Corrj Trichiasis Epilation Forceps Only               | 500.00      |
| 128 | OPT0128 | 67825 - Revise Eyelashes-Corrj Trichiasis Epilation Oth / Thn Forceps          | 500.00      |
| 129 | OPT0129 | 68020 - Incise / Drain Eyelid Lining-Inc Cjnc Drg Cst                          | 1,000.00    |
| 130 | OPT0130 | 68100 - Biopsy Of Eyelid Lining-Bx Cjnc                                        | 1,000.00    |
| 131 | OPT0131 | 68200 - Treat Eyelid By Injection-Scjnc Njx                                    | 850.00      |
| 132 | OPT0132 | 68371 - Harvest Eye Tissue Alograft-Hrvj Cjnc Algrft Liv Don                   | 850.00      |
| 133 | OPT0133 | 68399 - Eyelid Lining Surgery-Unlis Cjnc                                       | 850.00      |
| 134 | OPT0134 | 68400 - Incise / Drain Tear Gland-Inc Drg Lacrimal Gnd                         | 850.00      |
| 135 | OPT0135 | 68420 - Incise / Drain Tear Sac-Inc Drg Lacrimal Sac                           | 850.00      |
| 136 | OPT0136 | 68440 - Incise Tear Duct Opening-Snip Inc Lacrimal Punctum                     | 500.00      |
| 137 | OPT0137 | 68705 - Revise Tear Duct Opening-Corrj Everted Punctum Caut                    | 850.00      |
| 138 | OPT0138 | 68760 - Close Tear Duct Opening-Clsr Lacrimal Punctum Thermocaut Lig / Laser   | 850.00      |
| 139 | OPT0139 | 68761 - Close Tear Duct Opening-Clsr Lacrimal Punctum Plug Ea                  | 350.00      |
| 140 | OPT0140 | 68801 - Dilate Tear Duct Opening-Dilat Lacrimal Punctum +Irrg                  | 500.00      |

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# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE    | DESCRIPTION                                                            | PRICE (QAR) |
|-----|---------|------------------------------------------------------------------------|-------------|
| 141 | OPT0141 | 68810 - Probe Nasolacrimal Duct-Probe Nasolacrimal Dux +Irrg           | 750.00      |
| 142 | OPT0142 | 68840 - Explore / Irrigate Tear Ducts-Probe Lacrimal Canaliculi +Irrg  | 500.00      |
| 143 | OPT0143 | 68850 - Injection For Tear Sac X-Ray-Njx Cntrst Medium Dacryocstograpy | 850.00      |
| 144 | MAG0003 | Ophthalmology Exam (Eye Test)                                          | 300.00      |
| 145 | SRV0018 | Color Vision                                                           | 60.00       |
| 146 | SRV0083 | Vision Screen                                                          | 170.00      |
| 147 | OPT0144 | Optometrist Fee-Adult                                                  | 150.00      |
| 148 | OPT0145 | Optometrist Fee-Child                                                  | 250.00      |

## ORTHOPEDIC

### Packages

|    |          |                                                                |           |
|----|----------|----------------------------------------------------------------|-----------|
| 1  | PKG07001 | (ORP / D Case) 10000 I&D (Non)/Infected Cyst                   | 5,950.00  |
| 2  | PKG07002 | (ORP / D Case) 10000 I&D Sebaceous Cyst                        | 5,950.00  |
| 3  | PKG07003 | (ORP / D Case) 10020 I&D Furuncle                              | 5,950.00  |
| 4  | PKG07004 | (ORP / D Case) 10060 I&D Abscess-Simple                        | 6,100.00  |
| 5  | PKG07005 | (ORP / D Case) 10061 I&D Abscess-Complicated                   | 6,100.00  |
| 6  | PKG07006 | (ORP / D Case) 10120 Incision And Removal Of Fb/Sutures-Simple | 8,200.00  |
| 7  | PKG07007 | (ORP / D Case) 10120 Remove Foreign Body                       | 8,200.00  |
| 8  | PKG07008 | (ORP / D Case) 10140 I&D Of Hematoma-Simple                    | 6,100.00  |
| 9  | PKG07009 | (ORP / D Case) 10141 I&D Of Hematoma-Complicated               | 6,100.00  |
| 10 | PKG07010 | (ORP / D Case) 10160 Needle Aspiration-Abs/Hematoma            | 5,950.00  |
| 11 | PKG07011 | (ORP / D Case) 11000 Debridement Infected Skin                 | 8,200.00  |
| 12 | PKG07012 | (ORP / 01 Day) 11400 Excision Lesion Trunk                     | 6,950.00  |
| 13 | PKG07013 | (ORP / 01 Day) 16010 Dress And/Or Debridement                  | 6,700.00  |
| 14 | PKG07014 | (ORP / 01 Day) 16025 Dress And/Or Debride Med.                 | 8,800.00  |
| 15 | PKG07015 | (ORP / 01 Day) 20520 Excision Foreign Body Muscle              | 8,800.00  |
| 16 | PKG07016 | (ORP / 01 Day) 20670 Remove Implant(Eg Wire)                   | 6,000.00  |
| 17 | PKG07017 | (ORP / 01 Day) 20680 Remove Implant Deep                       | 6,700.00  |
| 18 | PKG07018 | (ORP / 01 Day) 21555 Excision Benign Tumor                     | 7,550.00  |
| 19 | PKG07019 | (ORP / 01 Day) 21556 Excision Benign Tumor Deep                | 10,000.00 |
| 20 | PKG07020 | (ORP / 05 Days) 22033 Excision Spinal Tumor Lumbar             | 18,300.00 |
| 21 | PKG07021 | (ORP / 03 Days) 22115 Excision Lumbar Vert W/ Suctio           | 24,900.00 |
| 22 | PKG07022 | (ORP / 07 Days) 22355 Lumbar Fusion W/Local Bon                | 38,650.00 |
| 23 | PKG07023 | (ORP / 07 Days) 22700 Lumbar Spine Fusion                      | 35,700.00 |
| 24 | PKG07024 | (ORP / 03 Days) 22850 Remove Harrington Rod                    | 18,850.00 |
| 25 | PKG07025 | (ORP / 03 Days) 23030 I&D Abscess Shoulder                     | 9,950.00  |
| 26 | PKG07026 | (ORP / 02 Days) 23040 Arthrotomy Shoulder                      | 13,550.00 |
| 27 | PKG07027 | (ORP / 01 Day) 23110 Excision Subacromial Bursa                | 9,650.00  |
| 28 | PKG07028 | (ORP / 01 Day) 23330 Implant Removal Shoulder                  | 16,700.00 |
| 29 | PKG07029 | (ORP / 01 Day) 23331 Remove Foreign Body Shoul                 | 9,150.00  |
| 30 | PKG07030 | (ORP / 03 Days) 23670 Should Dislocate W/Open                  | 14,650.00 |
| 31 | PKG07031 | (ORP / 01 Day) 23140 Excision Cyst Clavicle/Scapula            | 9,500.00  |
| 32 | PKG07032 | (ORP / 03 Days) 23485 Bone Graft For Non-Union                 | 12,950.00 |
| 33 | PKG07033 | (ORP / 02 Days) 23500 Clav.Fx. Closed W/O Reduc                | 13,450.00 |
| 34 | PKG07034 | (ORP / 03 Days) 23615 Humerus Fx. W/ W/O Fixati                | 17,150.00 |
| 35 | PKG07035 | (ORP / 05 Days) 23680 Neck Fracture Open Reduct                | 20,150.00 |
| 36 | PKG07036 | (ORP / 03 Days) 23930 I&D Abscess Humerus/Elbow                | 10,950.00 |
| 37 | PKG07037 | (ORP / 03 Days) 23931 I&D Infect.Bursa Humerus                 | 10,950.00 |
| 38 | PKG07038 | (ORP / 02 Days) 24430 Repair Nonunion Humerus                  | 15,950.00 |
| 39 | PKG07039 | (ORP / 03 Days) 24500 Humeral Shaft Fx Closed                  | 17,150.00 |
| 40 | PKG07040 | (ORP / 03 Days) 24505 Humeral Shaft Fx W/ Reduc                | 19,850.00 |
| 41 | PKG07041 | (ORP / 02 Days) 24130 Radial Head Excision Humerus             | 11,850.00 |
| 42 | PKG07042 | (ORP / 02 Days) 24145 Partial Excision Radial Head             | 13,050.00 |

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| SR | CODE     | DESCRIPTION                                         | PRICE (QAR) |
|----|----------|-----------------------------------------------------|-------------|
| 43 | PKG07043 | (ORP / 01 Day) 24160 Implant Removal Elbow Joi      | 9,800.00    |
| 44 | PKG07044 | (ORP / 01 Day) 24201 Removal Foreign Body Elbo      | 9,800.00    |
| 45 | PKG07045 | (ORP / 01 Day) 24530 Supracondylar Fx W/Out Re      | 12,000.00   |
| 46 | PKG07046 | (ORP / 01 Day) 24545 Supracondylar Fx W/O Fix       | 14,100.00   |
| 47 | PKG07047 | (ORP / 01 Day) 24579 Condylar Fx W/Or W/Out Fix     | 14,100.00   |
| 48 | PKG07048 | (ORP / 03 Days) 24585 Comminuted Elbow Fx W/Fix     | 17,150.00   |
| 49 | PKG07049 | (ORP / 01 Day) 24605 Elbow Dislocation W/Manip      | 6,950.00    |
| 50 | PKG07050 | (ORP / 01 Day) 24700 Manipulation Elbow Joint       | 6,950.00    |
| 51 | PKG07051 | (ORP / 01 Day) 25011 Excisionganglion Wrist         | 11,100.00   |
| 52 | PKG07052 | (ORP / 03 Days) 25028 I&D Deep Abscess Forearm      | 9,700.00    |
| 53 | PKG07053 | (ORP / 02 Days) 25350 Osteotomy Radius              | 15,950.00   |
| 54 | PKG07054 | (ORP / 01 Day) 25515 Radial Fx W/Or W/Out Fix       | 14,100.00   |
| 55 | PKG07055 | (ORP / 01 Day) 25545 Ulnar Fx W/Or W/Out Skel       | 14,100.00   |
| 56 | PKG07056 | (ORP / 01 Day) 25575 Radial/Ulna Fx W/Or W/Ou       | 14,100.00   |
| 57 | PKG07057 | (ORP / 01 Day) 26034 Deep Incision Hand/Finger      | 9,500.00    |
| 58 | PKG07058 | (ORP / 01 Day) 26160 Excision Ganglion Cyst Hand/Fi | 11,100.00   |
| 59 | PKG07059 | (ORP / 02 Days) 26356 Flexor Tendon Repair Hand     | 14,050.00   |
| 60 | PKG07060 | (ORP / 01 Day) 26410 Ext. Tendor Repair Dorsum      | 10,150.00   |
| 61 | PKG07061 | (ORP / 01 Day) 26432 Mallet Finger Repair           | 9,500.00    |
| 62 | PKG07062 | (ORP / 01 Day) 26615 Metacarpal Fx W/Or W/Out       | 10,400.00   |
| 63 | PKG07063 | (ORP / 01 Day) 26641 Dislocated Thumb W/Manipu      | 8,450.00    |
| 64 | PKG07064 | (ORP / 03 Days) 27030 Arthrotomy Hip For Draina     | 14,750.00   |
| 65 | PKG07065 | (ORP / 01 Day) 27087 Remove Foreign Body In Hi      | 9,100.00    |
| 66 | PKG07066 | (ORP / 04 Days) 27090 Removal Hip Prosthesis        | 21,650.00   |
| 67 | PKG07067 | (ORP / 04 Days) 27091 Removal Total Hip Compone     | 21,650.00   |
| 68 | PKG07068 | (ORP / 07 Days) 27130 Total Hip Replacement         | 39,600.00   |
| 69 | PKG07069 | (ORP / 07 Days) 27135 Revision Arthroplasty Hip     | 46,100.00   |
| 70 | PKG07070 | (ORP / 05 Days) 27176 Pin Fem. Epiphysis            | 31,900.00   |
| 71 | PKG07071 | (ORP / 07 Days) 27224 Acetabulum Fx W/Or W/Out      | 27,150.00   |
| 72 | PKG07072 | (ORP / 07 Days) 27230 Femur Fracture Proximal       | 28,650.00   |
| 73 | PKG07073 | (ORP / 03 Days) 27252 Manipulate Reduct Hip Dis     | 13,300.00   |
| 74 | PKG07074 | (ORP / 03 Days) 27310 Arthrotomy W/Knee Explore     | 15,250.00   |
| 75 | PKG07075 | (ORP / 01 Day) 27562 Manipulate Patella Disloc      | 8,700.00    |
| 76 | PKG07076 | (ORP / 01 Day) 27570 Manipulate Knee Joint          | 7,450.00    |
| 77 | PKG07077 | (ORP / 01 Day) 27603 I&D Deep Abscess Leg           | 7,800.00    |
| 78 | PKG07078 | (ORP / 01 Day) 27618 Excision Tumor Subcutaneous Le | 7,050.00    |
| 79 | PKG07079 | (ORP / 01 Day) 27373 Arthroscopy Knee               | 9,650.00    |
| 80 | PKG07080 | (ORP / 01 Day) 27378 Arthroscopy Partial Menisec    | 13,050.00   |
| 81 | PKG07081 | (ORP / 03 Days) 27402 Reconstruct Anterior Cruc     | 26,050.00   |
| 82 | PKG07082 | (ORP / 05 Days) 27438 Arthroplasty Patella W/Im     | 27,800.00   |
| 83 | PKG07083 | (ORP / 07 Days) 27447 Arthroplasty Total Knee       | 41,950.00   |
| 84 | PKG07084 | (ORP / 02 Days) 27455 Correct Genus Varus           | 15,700.00   |
| 85 | PKG07085 | (ORP / 02 Days) 27455 Osteotomy (Correct Genu V     | 15,700.00   |
| 86 | PKG07086 | (ORP / 02 Days) 27705 Osteotomy Tibia               | 15,950.00   |
| 87 | PKG07087 | (ORP / 02 Days) 27720 Repair Nonunion Tibia         | 15,950.00   |
| 88 | PKG07088 | (ORP / 01 Day) 27722 Sliding Bone Graft Tibia       | 14,350.00   |
| 89 | PKG07089 | (ORP / 02 Days) 27814 Bimalle. Ankle Frac W/Fix     | 15,950.00   |
| 90 | PKG07090 | (ORP / 02 Days) 27842 Ankle Dislocation W/Reduc     | 12,500.00   |
| 91 | PKG07091 | (ORP / 03 Days) 27870 Ankle Fusion Any Method       | 17,400.00   |
| 92 | PKG07092 | (ORP / 01 Day) 27630 Excise Ganglion Cyst Leg/      | 11,050.00   |
| 93 | PKG07093 | (ORP / 03 Days) 27650 Repair Achillesion Tendon     | 18,100.00   |
| 94 | KG07094  | (ORP / 01 Day) 27664 Repair Extensor Tendon Le      | 11,350.00   |
| 95 | PKG07095 | (ORP / 01 Day) 27704 Implant Removal Ankle          | 8,450.00    |
| 96 | PKG07096 | (ORP / 01 Day) 28001 I&D Bursa Foot                 | 7,150.00    |

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# AL-AHLI HOSPITAL PRICE LIST

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| SR  | CODE     | DESCRIPTION                                                                      | PRICE (QAR) |
|-----|----------|----------------------------------------------------------------------------------|-------------|
| 97  | PKG07097 | (ORP / 01 Day) 28090 Excise Ganglion Cyst Foot                                   | 11,100.00   |
| 98  | PKG07098 | (ORP / 01 Day) 28192 Remove Foreign Body Foot                                    | 8,800.00    |
| 99  | PKG07099 | (ORP / 02 Days) 28200 Flexor Tendon Repair Foot                                  | 13,050.00   |
| 100 | PKG07100 | (ORP / 01 Day) 28285 Repair Hammertoe                                            | 7,050.00    |
| 101 | PKG07101 | (ORP / 02 Days) 28415 Os Calcis Fx W/O Skel Fix                                  | 13,200.00   |
| 102 | PKG07102 | (ORP / 01 Day) 28495 Great Toe Fx W/ Manipulat                                   | 10,400.00   |
| 103 | PKG07103 | (ORP / 01 Day) 28750 Great Toe Arthrodesis                                       | 11,600.00   |
| 104 | PKG07104 | (ORP / 01 Day) 29345 Long Leg Cast (Thigh ?Toe                                   | 5,700.00    |
| 105 | PKG07105 | (ORP / 01 Day) 29405 Short Leg Cast (Knee-Toe)                                   | 5,700.00    |
| 106 | PKG07106 | (ORP / 01 Day) 64718 Neurolysis Ulnar At Elbow                                   | 10,150.00   |
| 107 | PKG07107 | (ORP / 01 Day) 64721 Neurolysis Carpal Tunnel                                    | 7,050.00    |
| 108 | PKG07108 | (ORP / 01 Day) Scoliosis plaster Jacket                                          | 5,000.00    |
| 109 | PKG07109 | (ORP / 01 Day) Scoliosis plaster Jacket on Cotrel frame                          | 5,800.00    |
| 110 | PKG07110 | (ORP / 01 Day) Scoliosis plaster Jacket on Cotrel frame with sedation / GA       | 6,600.00    |
| 111 | PKG07111 | (ORP / 01 Day) Scoliosis Brace Cheneau type (TLSO)                               | 5,400.00    |
| 112 | PKG07112 | (ORP / 01 Day) Scoliosis brace Boston type (LSO)                                 | 5,150.00    |
| 113 | PKG07113 | (ORP / 05 Days) Posterior spinal fusion (PSF) for thoracic scoliosis (av. 6 leve | 63,900.00   |
| 114 | PKG07114 | (ORP / 05 Days) PSF for thoracolumbar scoliosis Double curves (av. 12 level)     | 62,300.00   |
| 115 | PKG07115 | (ORP / 03 Days) Costoplasty                                                      | 31,600.00   |
| 116 | PKG07116 | (ORP / 05 Days) Anterior thoracic spinal fusion (ASF) & fixation for thoracic sc | 65,500.00   |
| 117 | PKG07117 | (ORP / 03 Days) Anterior T-L spinal fusion & instrumentation TL scoliosis        | 66,300.00   |
| 118 | PKG07118 | (ORP / 05 Days) Revision PSF for thoracic or thoraco-lumbar scoliosis            | 73,900.00   |
| 119 | PKG07119 | (ORP / 05 Days) Revision ASF & instrumentation for thoracic or thoraco-lumbar sc | 74,700.00   |
| 120 | PKG07120 | (ORP / 02 Days) Thoracoscopic spinal procedures                                  | 37,650.00   |
| 121 | PKG07121 | (ORP / 05 Days) Combined ASF with PSF and fixation for severe scoliosis ( one /  | 70,300.00   |
| 122 | PKG07122 | (ORP / 06 Days) Neuromuscular scoliosis PSF and instrumentation without pelvic f | 63,500.00   |
| 123 | PKG07123 | (ORP / 06 Days) Neuromuscular scoliosis PSF and instrumentation with pelvic fixa | 67,900.00   |
| 124 | PKG07124 | (ORP / 03 Days) Expansion thoracoplasty (VEPTR) application                      | 45,600.00   |
| 125 | PKG07125 | (ORP / 03 Days) Expansion thoracoplasty (VEPTR) expansion                        | 28,150.00   |
| 126 | PKG07126 | (ORP / 03 Days) Expansion thoracoplasty (VEPTR) revision                         | 44,650.00   |
| 127 | PKG07127 | (ORP / 04 Days) Congenital scoliosis hemivertebrectomy                           | 39,400.00   |
| 128 | PKG07128 | (ORP / 04 Days) Myelomeningiocoel kyphectomy                                     | 45,950.00   |
| 129 | PKG07129 | (ORP / 04 Days) PSF for Kyphosis, Tumour or infection                            | 68,300.00   |
| 130 | PKG07130 | (ORP / 05 Days) Revision Lumbar Disc Excision                                    | 48,050.00   |
| 131 | PKG07131 | (ORP / 03 Days) Decompression for Spinal Stenosis                                | 34,850.00   |
| 132 | PKG07132 | (ORP / 02 Days) Percutaneous Vertebroplasty                                      | 28,650.00   |
| 133 | PKG07133 | (ORP / 05 Days) Revision Decompression Spinal Stenosis                           | 49,100.00   |
| 134 | PKG07134 | (ORP / 05 Days) Primary Posterior Fusion without instrumentation                 | 52,100.00   |
| 135 | PKG07135 | (ORP / 05 Days) Primary Posterior Fusion with Instrumentation                    | 53,890.00   |
| 136 | PKG07136 | (ORP / 05 Days) Revision Posterior Fusion with instrumentation                   | 59,630.00   |
| 137 | PKG07137 | (ORP / 12 Days) Combined anterior vertebrectomy with posterior fusion and inst   | 86,300.00   |
| 138 | PKG07138 | (ORP / 03 Days) Removal of posterior scoliosis instrumentation                   | 35,800.00   |
| 139 | PKG07139 | (ORP / 01 Day) Paravertebral block up to two levels under X-ray control          | 11,190.00   |
| 140 | PKG07140 | (ORP / 01 Day) Dorsal root ganglion block (radiofrequency)                       | 33,200.00   |
| 141 | PKG07141 | (ORP / 01 Day) Epidural injection (lumbar/caudal)                                | 11,000.00   |
| 142 | PKG07142 | (ORP / 01 Day) Facet joint injection (under X-ray control) - up to 2 joints      | 8,000.00    |
| 143 | PKG07143 | (ORP / 01 Day) Facet joint injection (under X-ray control) - 3 to 4 joints       | 9,100.00    |
| 144 | PKG07144 | (ORP / 01 Day) Facet joint injection (under X-ray control) - 5 to 6 joints       | 10,100.00   |
| 145 | PKG07145 | (ORP/3-Days) Metatarsal osteotomy                                                | 20,000.00   |
| 146 | PKG07146 | (ORP/ 1-Day)Release of constriction of sheath of tendon (eg trigger finger)      | 11,500.00   |
| 147 | PKG07147 | (ORP/ 1-Day)Injection(s) into joint(s)                                           | 9,000.00    |
| 148 | PKG07148 | (ORP/ 1-Day)Botox injection                                                      | 5,700.00    |
| 149 | PKG07149 | (ORP/ 02 Days)Surgery for bunionette deformity                                   | 14,000.00   |
| 150 | PKG07150 | (ORP/1 Day)Excision of lesion of meniscus or capsule(eg,cyst,ganglion),knee      | 14,250.00   |

Musaid A. Al-Ahli (MBA, FCA, ACCA)

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Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                        | PRICE (QAR) |
|-----|----------|----------------------------------------------------------------------------------------------------|-------------|
| 151 | PKG07151 | (ORP/ 2 Days) Manipulation of joint (including intra-articular injection)                          | 9,450.00    |
| 152 | PKG07152 | (ORP/ 1 Day) 27630 Excision of lesion tendon sheath or capsule (eg, cyst / ganglion), leg or ankle | 11,450.00   |
| 153 | PKG07153 | (ORP/ 3 Days) 27080 Coccygectomy                                                                   | 31,300.00   |
| 154 | PKG07154 | (ORP/ 7days) 22633 + 22634 Combined Anterior Discectomy And Posterior Fusion                       | 80,850.00   |
| 155 | PKG07155 | (ORP/ 6days) 22633 Spondylolithesis, Spinal Fusion With Reduction - Single Level                   | 83,150.00   |
| 156 | PKG07156 | (ORP/ 3days) 27165 Application Of External Fixatory & Osteotomy                                    | 37,100.00   |
| 157 | PKG07157 | (ORP/ 3days) 63012 Laminectomy With Removal Of Abnormal Facets And/Or Pars Inter-Articularis       | 46,400.00   |
| 158 | PKG07158 | (ORP/ 3days) 22850 Removal Of Spinal Instrumentation                                               | 36,950.00   |
| 159 | PKG07159 | (ORP/ 2days) 26045 + 26125 Dupuytren's Fasciectomy Multiple Digits                                 | 30,625.00   |
| 160 | PKG07160 | (ORP/ 7days) 27138 Orif And Revision Of Femoral Component For                                      | 52,450.00   |
| 161 | PKG07161 | (ORP/ 3days) 22899 Spinal Dynamic Stabilisation Devices                                            | 37,200.00   |
| 162 | PKG07162 | (ORP/ 3days) 27175 Slipped Femoral Epiphysis (3 Days)                                              | 31,450.00   |
| 163 | PKG07163 | (ORP/ 3days) 27428-59 Reconstruction Of Posterior Lateral Corner Of Knee                           | 34,500.00   |
| 164 | PKG07164 | (ORP/ 1days) 64722 Decompression; Unspecified Nerve(S) (Specify)                                   | 20,000.00   |
| 165 | PKG07165 | (ORP/ 1days) 23180 Excision Distal Clavicle- As Sole Procedure                                     | 22,000.00   |
| 166 | PKG07166 | (ORP/ 1days) 25447 Carpometacarpal Joint Ligament Reconstruction                                   | 21,550.00   |
| 167 | PKG07167 | (ORP/ 7days) 27236 Orif For Periprosthetic Fracture Around Hip Xmajor                              | 52,550.00   |
| 168 | PKG07168 | (ORP/ 1days) 29885 Arthroscopic Drilling Of Osteocondral Lesion +/- Fixation                       | 25,150.00   |
| 169 | PKG07169 | (ORP/ 3days) 28445 Orif Fracture Talus                                                             | 25,500.00   |
| 170 | PKG07170 | (ORP/ 1days) 20936 Bone Graft - Spine Surgery                                                      | 16,800.00   |
| 171 | PKG07171 | (ORP/ 2days) 25628 Early Open Reduction And Internal Fixation Of Scaphoid                          | 24,300.00   |
| 172 | PKG07172 | (ORP/ 2days) 27696 Multiple Ligament Reconstruction (Foot)                                         | 29,000.00   |
| 173 | PKG07173 | (ORP/ 2days) 23412 Multiple Ligament Reconstruction (Shoulder)                                     | 28,400.00   |
| 174 | PKG07174 | (ORP/ 2days) 27409 Multiple Ligament Reconstruction (Knee)                                         | 28,000.00   |
| 175 | PKG07175 | (ORP/ 2days) Orif Of Cancellous Bone Graft Scaphoid Non-Union                                      | 30,100.00   |
| 176 | PKG07176 | (ORP/ 2days) 26350-59 Or 26356-59 Second Stage Reconstruction Of Flexor Of Hand                    | 30,250.00   |
| 177 | PKG07177 | (ORP/ 2days) 25320 Multiple Ligament Reconstruction (Hand)                                         | 30,000.00   |
| 178 | PKG07178 | (ORP/ 3days) 22899 Unlisted Procedure, Spine (Eg, Spinal Dynamic Stabilisation)                    | 36,400.00   |
| 179 | PKG07179 | (ORP/ 1days) 25447 Total Excision Of Trapezium And Ligament                                        | 20,750.00   |
| 180 | PKG07180 | (ORP/ 1days) 29823 Therapeutic Arthroscopic Operation On Cavity                                    | 17,050.00   |
| 181 | PKG07181 | (ORP/ 2days) 23180 Partial Excision Clavicle (2 Days)                                              | 19,125.00   |
| 182 | PKG07182 | (ORP/ 2days) 24130 Excision Of Radial Head                                                         | 21,050.00   |
| 183 | PKG07183 | (ORP/ 2days) 23430 Tenodesis Of Biceps Tendon                                                      | 20,750.00   |
| 184 | PKG07184 | (ORP/ 1days) 28272.50 Fusion Of Interphalangeal Joint Of Toe Each (Bilateral)                      | 19,950.00   |
| 185 | PKG07185 | (ORP/ 3days) 28415 Orif Fracture Calcanean                                                         | 26,450.00   |
| 186 | PKG07186 | (ORP/ 3days) 27455 Osteotomy, Proximal Tibia, Including Fibular Excision Or Osteotomy (Includes    | 28,450.00   |
| 187 | PKG07187 | (ORP/ 3days) 29827-22 Revision Rotator Cuff Repair                                                 | 29,700.00   |
| 188 | PKG07188 | (ORP/ 1days) 28080 Morton'S Neuroma Excision                                                       | 15,000.00   |
| 189 | PKG07189 | (ORP/ 1days) 64718 Cubital Tunnel Release Including Endoscopic (Bilateral)                         | 16,450.00   |
| 190 | PKG07190 | (ORP/ 2days) 28299 Metatarsal Osteotomy For Hallux Valgus And Soft Tissue                          | 26,750.00   |
| 191 | PKG07191 | (ORP/ 2days) 26645 Carpometacarpal Fx(Bennet (2 Days)                                              | 18,000.00   |
| 192 | PKG07192 | (ORP/ 2days) 20680 Removal Of Implant; Deep (Eg, Buried Wire, Pin, Screw, Metal Band, Nail, Rod    | 22,000.00   |
| 193 | PKG07193 | (ORP/ 3days) 27429 Reconstruction Of Lateral Collateral Ligament                                   | 20,600.00   |
| 194 | PKG07194 | (ORP/ 2days) 26050 Dupuytren'S Fasciotomy & Soft Tissue                                            | 20,000.00   |
| 195 | PKG07195 | (ORP/ 1days) 25295 Tenolysis Of Flexor Tendon Of Hand                                              | 15,500.00   |
| 196 | PKG07196 | (ORP/ 3days) 23515 Plating And Bone Grafting For Non-Union Of Clavicle                             | 25,000.00   |
| 197 | PKG07197 | (ORP/ 5days) 27870 Ankle Arthrodesis Open Intermediate                                             | 29,550.00   |
| 198 | PKG07198 | (ORP/ 1days) 26540 Small Joint Ligament Reconstruction                                             | 15,550.00   |
| 199 | PKG07199 | (ORP/ 3days) 27654 Secondary Repair & Achilles Tendon +/- Tendon Transfer                          | 20,500.00   |
| 200 | PKG07200 | (ORP/ 3days) 27254 Open Reduction Of Dislocated Hip Prosthesis                                     | 25,800.00   |
| 201 | PKG07201 | (ORP/ 5days) 23470 Shoulder Hemiarthroplasty And/Or Reconstruction                                 | 36,800.00   |
| 202 | PKG07202 | (ORP/ 4days) 28715 Triple Arthodesis                                                               | 30,350.00   |
| 203 | PKG07203 | (ORP/ 1days) 26418 Primary Repair Of Extensor Of Hand                                              | 15,050.00   |
| 204 | PKG07204 | (ORP/ 5days) 23472 Total Shoulder Replacement (5 Days)                                             | 39,900.00   |

Mustafa El-Ahwal (MBA, FCA, ACCA)

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Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

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|-----|----------|------------------------------------------------------------------------------------------------|-------------|
| 205 | PKG07205 | (ORP/ 2days) 27350 Orif Patella                                                                | 19,000.00   |
| 206 | PKG07206 | (ORP/ 2days) 26120 Palmar Fasciectomy Hand/F (2 Days)                                          | 16,900.00   |
| 207 | PKG07207 | (ORP/ 1days) 26445 Tenolysis Of Extensor Tendon Of Hand                                        | 17,750.00   |
| 208 | PKG07208 | (ORP/ 3days) 27177 Pinning Of Head Of Femur ? Open Or Percutaneous                             | 23,950.00   |
| 209 | PKG07209 | (ORP/ 1days) 24790 Excision Of Neurofibroma Or Neurolemmoma; Major Peripheral Nerve            | 13,000.00   |
| 210 | PKG07210 | (ORP/ 1days) 27704 Removal Of Ankle Implant                                                    | 12,800.00   |
| 211 | PKG07211 | (ORP/ 2days) 25608 Wrist Intratricular Fracture Orif                                           | 21,500.00   |
| 212 | PKG07212 | (ORP/ 2days) 24342 Reinsertion Of Ruptured Biceps Or Triceps Tendon, Distal, With Or Without T | 21,475.00   |
| 213 | PKG07213 | (ORP/ 2days) 29826 Arthroscopic Subacromial Decompression And Excision                         | 21,525.00   |
| 214 | PKG07214 | (ORP/ 3days) 23410 Repair Of Rupture Of Acromioclavicular Or Sternoclavicular                  | 21,150.00   |
| 215 | PKG07215 | (ORP/ 2days) 29871 Arthroscopic Lavage & Drainage                                              | 13,500.00   |
| 216 | PKG07216 | (ORP/ 2days) 26200 Excision Bone Cyst/Tumor Metac Superficial                                  | 14,100.00   |
| 217 | PKG07217 | (ORP/ 1days) 20610 Intraarticular Injection Under X-Ray Control                                | 7,250.00    |
| 218 | PKG07218 | (ORP/ 1days) 28090 Excision Of Lesion Tendon Sheath Or Capsule (Eg, Cyst Or Ganglion) Foot     | 10,450.00   |
| 219 | PKG07219 | (ORP/ 1days) 28160 Excision Or Partial Excision Of Ip Joint Of A Toe With                      | 10,450.00   |
| 220 | PKG07220 | (ORP/ 2days) 27500 Femur Shaft Fracture (Closed)                                               | 16,250.00   |
| 221 | PKG07221 | (ORP/ 2days) 27479 Arrest Epiphyseal Knee                                                      | 16,250.00   |
| 222 | PKG07222 | (ORP/ 2days) 26910 Amputate Metacarpal W/Fin (2 Days)                                          | 11,650.00   |
| 223 | PKG07223 | (ORP/ 2days) 27252 Closed Reduction Of Dislocated Hip Prosthesis                               | 11,650.00   |
| 224 | PKG07224 | (ORP/ 1days) 64721 Carpal Tunnel Release- Including Endoscopic (Bilateral)                     | 13,200.00   |
| 225 | PKG07225 | (ORP/ 5days) 23470 + 23331 Revisional Shoulder Hemiarthroplasty                                | 33,550.00   |
| 226 | PKG07226 | (ORP/ 5days) 23470 Shoulder Hemiarthroplasty- As Sole Procedure                                | 33,550.00   |
| 227 | PKG07227 | (ORP/ 1days) 29805 Diagnostic Arthroscopic Examination Of Joint-                               | 10,450.00   |
| 228 | PKG07228 | (ORP/ 3days) 25405 Autogenous Graft Wrist (3 Days)                                             | 17,450.00   |
| 229 | PKG07229 | (ORP/ 3days) 27424 Patellectomy                                                                | 17,500.00   |
| 230 | PKG07230 | (ORP/ 1days) 64445 Sacral Root Block Under X-Ray Control                                       | 7,500.00    |
| 231 | PKG07231 | (ORP/ 2days) 23410 Open Subacromial Decompression- As Sole Procedure                           | 20,250.00   |
| 232 | PKG07232 | (ORP/ 1days) 11765 Wedge Excision Or Avulsion Of Skin Of Nail Fold (Eg Ingrowing Toenail)      | 7,350.00    |
| 233 | PKG07233 | (ORP/ 2days) 27036 Excision Of Ectopic Bone Around A Total Hip Replacement                     | 16,800.00   |
| 234 | PKG07234 | (ORP/ 1days) 64726 Release Of Entrapment Of Deeply Placed Peripheral Nerve                     | 11,300.00   |
| 235 | PKG07235 | (ORP/ 3days) 24435 Humerus Non-Union With Internal Fixation And Bone Graft                     | 28,650.00   |
| 236 | PKG07236 | (ORP/ 3days) 27514 Femoral Intercondylar Fracture Orif                                         | 28,650.00   |
| 237 | PKG07237 | (ORP/ 3days) 27506 Femur Shaft Fx W/Or W/Out                                                   | 28,650.00   |
| 238 | PKG07238 | (ORP/ 2days) 26356 Primary Repair Of Flexor Of Hand Including Zone II                          | 20,150.00   |
| 239 | PKG07239 | (ORP/ 2days) 24341 Repair, Tendon Or Muscle, Each Tendon Or Muscle, Primary Or Secondary       | 16,800.00   |
| 240 | PKG07240 | (ORP/ 1days) 26860 Fusion Of Digit Joint(S) Of Hand                                            | 13,000.00   |
| 241 | PKG07241 | (ORP/ 2days) 29805 Diagnostic Arthroscopic Examination Of Shoulder Joint-                      | 16,700.00   |
| 242 | PKG07242 | (ORP/ 2days) 64727 Neurolysis And Transposition Of Peripheral Nerve                            | 13,000.00   |
| 243 | PKG07243 | (ORP/ 1days) 25160 Excision Of Ganglion Hand                                                   | 11,450.00   |
| 244 | PKG07244 | (ORP/ 1days) 25111 Excision Of Ganglion Wrist                                                  | 11,300.00   |
| 245 | PKG07245 | (ORP/ 1days) 11732 Avulsion Of Nail Plate, Partial Or Complete                                 | 6,500.00    |
| 246 | PKG07246 | (ORP/ 2days) 27652 Achilles Tendon Decompression                                               | 13,325.00   |
| 247 | PKG07247 | (ORP/ 1days) 27570 Manipulation Of Knee Joint Under General Anesthesia                         | 6,500.00    |
| 248 | PKG07248 | (ORP/ 2days) 28270/26520/23020 Release Of Contracture Of Joint                                 | 13,000.00   |
| 249 | PKG07249 | (ORP/ 1days) 29805 Shoulder Arthroscopy (1 Day)                                                | 17,700.00   |
| 250 | PKG07250 | (ORP/ 1days) 20693 Adjustments To Pin Sites Secondary For Non-Union/Mal-Union                  | 7,950.00    |
| 251 | PKG07251 | (ORP/ 1days) 64718 Cubital Tunnel Release Including Endoscopic                                 | 9,100.00    |
| 252 | PKG07252 | (ORP/ 1days) 26055 Trigger Finger Release (1 Day)                                              | 8,550.00    |
| 253 | PKG07253 | (ORP/ 1days) 64721 Carpal Tunnel Release- Including Endoscopic                                 | 8,600.00    |
| 254 | PKG07254 | (ORP/ 1days) 28234 Tenotomy Flexor Toe                                                         | 6,450.00    |
| 255 | PKG07255 | (ORP/ 1days) 28288 Chielectomy Foot                                                            | 12,000.00   |
| 256 | PKG07256 | (ORP/ 1days) 11765 Wedge Excision Or Avulsion Of Nail Including Chemical                       | 7,600.00    |
| 257 | PKG07257 | (ORP/ 2days) 25120 Excision Bone Cyst Radius/Uln (2 Days)                                      | 13,750.00   |
| 258 | PKG07258 | (ORP/ 2days) 64834 Repair Of Peripheral Nerve Intermediate                                     | 14,400.00   |

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# AL-AHLI HOSPITAL PRICE LIST

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| SR  | CODE     | DESCRIPTION                                                                         | PRICE (QAR) |
|-----|----------|-------------------------------------------------------------------------------------|-------------|
| 259 | PKG07259 | (ORP/ 1days) 29898 Ankle Arthroscopy                                                | 11,700.00   |
| 260 | PKG07260 | (ORP/ 1days) 29895 Therapeutic Arthroscopy Ankle (Synovectomy)                      | 11,450.00   |
| 261 | PKG07261 | (ORP/ 1days) 29894 Therapeutic Arthroscopy Of Ankle (Removal Of Loose Body)         | 11,600.00   |
| 262 | PKG07262 | (ORP/ 1days) 29897 Therapeutic Arthroscopy Of Ankle (Debridement)                   | 11,100.00   |
| 263 | PKG07263 | (ORP/ days) 15852 Removal Of Sutures Under Anaesthesia                              | 3,950.00    |
| 264 | PKG07264 | (ORP/ 2days) 29827 Shoulder Arthroscopic Rotator Cuff Repair                        | 19,025.00   |
| 265 | PKG07265 | (ORP/ 1days) 20553 Trigger Point Injection/Enthesis (3 Or More Injections)          | 4,650.00    |
| 266 | PKG07266 | (ORP/ 2days) 27485 Fixation Of Epiphysis- Including Epiphysiodesis-Femur Or Tibia   | 13,750.00   |
| 267 | PKG07267 | (ORP/ 1days) 29805 Arthroscopic Arthrolisis Of Shoulder Contracture                 | 15,750.00   |
| 268 | PKG07268 | (ORP/ 2days) 26951 Partial Amputation Of Digit                                      | 9,750.00    |
| 269 | PKG07269 | (ORP/ 1days) 64795 Biopsy Of Peripheral Nerve                                       | 9,650.00    |
| 270 | PKG07270 | (ORP/ 4days) 27125 Arthroplasty (Prosthesis) (4 Days)                               | 29,900.00   |
| 271 | PKG07271 | (ORP/ 1days) 11200 Excise Skin Tag Up To 15 (1 Day)                                 | 6,650.00    |
| 272 | PKG07272 | (ORP/ 1days) 28230 Tenotomy Flexor Foot                                             | 6,650.00    |
| 273 | PKG07273 | (ORP/ 1days) 11462 Excision Of Lesion Of Skin Or Subcutaneous Tissue                | 8,250.00    |
| 274 | PKG07274 | (ORP/ 1days) 28100/28118 Partial Excision Of Bone (Including Exostoses)             | 7,000.00    |
| 275 | PKG07275 | (ORP/ 1days) 20670 Removal Of Fixator/Frame/Pins/Wires And Change Of Plaster        | 5,500.00    |
| 276 | PKG07276 | (ORP/ 2days) 26350 Primary Repair Of Flexor Of Hand (Excluding Zone II)             | 18,000.00   |
| 277 | PKG07277 | (ORP/ 2days) 23420 Open Sub-Acromial Decompression And Extensive                    | 18,250.00   |
| 278 | PKG07278 | (ORP/ 1days) 29505 Application Of A Long Leg Splint                                 | 4,500.00    |
| 279 | PKG07279 | (ORP/ 1days) 29740 Wedging Of A Cast                                                | 4,500.00    |
| 280 | PKG07280 | (ORP/ 7days) 27215-27220 Orif Pelvic Fracture                                       | 44,000.00   |
| 281 | PKG07281 | (ORP/ 1days) 38221 Diagnostic Aspiration And/Or Trephine Biopsy Of Bone Marrow Mino | 6,650.00    |
| 282 | PKG07282 | (ORP/ 1days) 10121 Removal Of Foreign Body In Deeper Tissue                         | 6,750.00    |
| 283 | PKG07283 | (ORP/ 1days) 28272 Fusion Of Interphalangeal Joint Toe                              | 11,100.00   |
| 284 | PKG07284 | (ORP/ 1days) 25000 Dequervain'S Release                                             | 9,050.00    |
| 285 | PKG07285 | (ORP/ 1days) 24126 Excision Of Extosis (Single)                                     | 7,750.00    |
| 286 | PKG07286 | (ORP/ 1days) 27095 Arthrogram Of Joint (1 Day)                                      | 7,000.00    |
| 287 | PKG07287 | (ORP/ 1days) 28313 Reconstruction Of Toe Deformity                                  | 11,450.00   |
| 288 | PKG07288 | (ORP/ 1days) 20552 Trigger Point Injection/Enthesis (1-2 Injections)                | 3,800.00    |
| 289 | PKG07289 | (ORP/ 1days) 64708 Periph. Nerve Neurolysis                                         | 10,600.00   |
| 290 | PKG07290 | (ORP/ 1days) 12001 Secondary Suture Of Skin                                         | 5,000.00    |
| 291 | PKG07291 | (ORP/ 2days) 64834 Repair Nerve Hand/Foot                                           | 13,650.00   |
| 292 | PKG07292 | (ORP/ 2days) 28100 Excise Bone Cyst Foot                                            | 9,050.00    |
| 293 | PKG07293 | (ORP/ 1days) 28820 Amputation Toe                                                   | 10,250.00   |
| 294 | PKG07294 | (ORP/ 1days) 22505 Manipulation Of Spine Under Anesthesia                           | 3,650.00    |
| 295 | PKG07295 | (ORP/ 1days) 11760 Repair Of Nail Bed                                               | 6,100.00    |
| 296 | PKG07296 | (ORP/ 1days) 20999 Intramuscular Injection With X-Ray Control (Eg Piriformis Block) | 3,700.00    |
| 297 | PKG07297 | (ORP/ 2days) 29807 Shoulder Arthroscopy Repair Labral Tear (2 Days)                 | 23,100.00   |
| 298 | PKG07298 | (ORP/ 1days) 64787 Excision Of Lesion Of Peripheral Nerve (Eg Neurilemoma)          | 10,850.00   |
| 299 | PKG07299 | (ORP/ 1days) 29873 Arthroscopy Knee With Lateral Release                            | 10,000.00   |
| 300 | PKG07300 | (ORP/ 1days) 28225 Tenolysis- Of Extensor (Not Otherwise Specified) Foot            | 9,100.00    |
| 301 | PKG07301 | (ORP/ 1days) 25295 Tenolysis- Of Flexor Tendon (Not Otherwise Specified) Wrst/Hand  | 9,950.00    |
| 302 | PKG07302 | (ORP/ 2days) 11424 Excision Of Pressure Sore Excluding Repair                       | 8,200.00    |
| 303 | PKG07303 | (ORP/ 3days) 27385 Patella Tendon, Quadriceps Repair                                | 15,000.00   |
| 304 | PKG07304 | (ORP/ 3days) 27047 Excision Tumor Benign Deep Hip (Deep)                            | 12,000.00   |
| 305 | PKG07305 | (ORP/ 2days) 28108 Excision Of Benign Tumour Of Bone With Bone Grafting             | 12,550.00   |
| 306 | PKG07306 | (ORP/ 1days) 20206 Needle Biopsy Of Synovium                                        | 7,000.00    |
| 307 | PKG07307 | (ORP/ 1days) 28292 Excision Arthroplasty Of First Metatarsophalangeal Joint         | 12,050.00   |
| 308 | PKG07308 | (ORP/ 5days) 27487 Revision Knee Arthroplsty                                        | 42,950.00   |
| 309 | PKG07309 | (ORP/ 1days) 20245 Bone Biopsy Deep                                                 | 7,200.00    |
| 310 | PKG07310 | (ORP/ 1days) 26060 Percutaneous Tenotomy Minor                                      | 6,450.00    |
| 311 | PKG07311 | (ORP/ 1days) 28088 Excision Of Plantar Fibroma                                      | 8,350.00    |
| 312 | PKG07312 | (ORP/ 7days) 27447-50 Total Knee Replacement - Bilateral                            | 54,550.00   |

Director of Finance  
Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

المستشفى الأهلي  
AL-AHLI HOSPITAL

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                                                                                                           | PRICE (QAR) |
|-----|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 313 | PKG07313 | (ORP/ 5days) 27709 Osteotomy Tibia/Fibula                                                                                                                                             | 25,100.00   |
| 314 | PKG07314 | (ORP/ 1days) 11010 Debridement And Primary Suture Of Wound Without                                                                                                                    | 5,800.00    |
| 315 | PKG07315 | (ORP/ 4days) 28725 Subtalar Arthrodeses                                                                                                                                               | 20,650.00   |
| 316 | PKG07316 | (ORP/ 1days) 20550 Tendon Sheath Injection                                                                                                                                            | 4,150.00    |
| 317 | PKG07317 | (ORP/ 7days) 27446 Unicompartmental Knee Replacement Xmajor                                                                                                                           | 35,950.00   |
| 318 | PKG07318 | (ORP/ 2days) 29847 Ulnar Styloid +Tfcc Repair                                                                                                                                         | 18,850.00   |
| 319 | PKG07319 | (ORP/ 2days) 28750 Fusion Of 1St Mtp Joint                                                                                                                                            | 12,300.00   |
| 320 | PKG07320 | (ORP/ 2days) 29880 Meniscectomy                                                                                                                                                       | 12,650.00   |
| 321 | PKG07321 | (ORP/ 1days) 23031 Excision Of Bursa Shoulder                                                                                                                                         | 7,500.00    |
| 322 | PKG07322 | (ORP/ 1days) 26160 Excision Of Bursa Intermediate Hand Or Finger                                                                                                                      | 7,500.00    |
| 323 | PKG07323 | (ORP/ 1days) 24105 Excision Of Bursa Intermediate Elbow                                                                                                                               | 7,500.00    |
| 324 | PKG07324 | (ORP/ 4days) 28262 Complex Procedure To Mid- Or Hindfoot +/- Bone Graft                                                                                                               | 24,650.00   |
| 325 | PKG07325 | (ORP/ 3days) 24665 Radial Head/Neck Fx W/Fix /Excision                                                                                                                                | 13,250.00   |
| 326 | PKG07326 | (ORP/ 1days) 20694 Removal Of External Fixation From Bone                                                                                                                             | 4,450.00    |
| 327 | PKG07327 | (ORP/ 1days) 10061 Drainage Of Large Subcutaneous Abscess/Haematoma                                                                                                                   | 4,450.00    |
| 328 | PKG07328 | (ORP/ 2days) 29882 Repair Peripheral Meniscal Tear (Arthroscopic)                                                                                                                     | 16,650.00   |
| 329 | PKG07329 | (ORP/ 1days) 11750 Excision Of Nail Bed (Zadek?S) Intermediate                                                                                                                        | 5,100.00    |
| 330 | PKG07330 | (ORP/ 1days) 20205 Open Biopsy Of Muscle Or Soft Tissue Lesion Minor                                                                                                                  | 3,850.00    |
| 331 | PKG07331 | (ORP/ 3days) 25440 Repair Nonunion (Scaphoid) (3 Days)                                                                                                                                | 17,350.00   |
| 332 | PKG07332 | (ORP/ 2days) 64836 Repair Nerve Ulnar Motor                                                                                                                                           | 15,800.00   |
| 333 | PKG07333 | (ORP/ 1days) 20690 (Uniplane) Application Of External Fixation To Bone Ma                                                                                                             | 8,700.00    |
| 334 | PKG07334 | (ORP/ 1days) 20692 (Multiplane) Application Of External Fixation To Bone Ma                                                                                                           | 8,000.00    |
| 335 | PKG07335 | (ORP/ 5days) 27600/27601/27602/27496 Fasciotomy Of Limb                                                                                                                               | 12,150.00   |
| 336 | PKG07336 | (ORP/ 1days) 20240 Open Bone Biopsy Superficial                                                                                                                                       | 6,250.00    |
| 337 | PKG07337 | (ORP/ 5days) 27244 Dhs Hip Pinning                                                                                                                                                    | 27,200.00   |
| 338 | PKG07338 | (ORP/ 2days) 23000/27299 Open Excision Of Calcific Deposit (Eg Shoulder- Hip)                                                                                                         | 8,800.00    |
| 339 | PKG07339 | (ORP/ 3days) 24585 Comminuted Elbow Fx W/Out (3 Days)                                                                                                                                 | 21,450.00   |
| 340 | PKG07340 | (ORP/ 5days) 27254 Hip Dislocate. W/Acetabul (5 Days)                                                                                                                                 | 16,650.00   |
| 341 | PKG07341 | (ORP/ 4days) 25365 Osteotomy Of Radius/Ulna                                                                                                                                           | 15,000.00   |
| 342 | PKG07342 | (ORP/ 5days) 27438 Prosthetic Patellofemoral Replacement As Sole Procedure                                                                                                            | 18,500.00   |
| 343 | PKG07343 | (ORP/ 10days) 27487-58 2 Stage Revision Of Total Knee Replacement For Infection                                                                                                       | 43,300.00   |
| 344 | PKG07344 | (ORP/ 3days) 28103 Bone Graft Foot                                                                                                                                                    | 10,000.00   |
| 345 | PKG07345 | (ORP/ 2days) 28208 Repair Of Tendon Of Foot ? Extensor Minor                                                                                                                          | 8,500.00    |
| 346 | PKG07346 | (ORP/ 5days) 27177-50 Pinning For Bilateral Slipped Upper Femoral Epiphysis X                                                                                                         | 28,550.00   |
| 347 | PKG07347 | (ORP/ 1days) 11001 Debridement Of Wound (And Surgical Toilet) ? Up To 25Cm2 In Area                                                                                                   | 8,000.00    |
| 348 | PKG07348 | (ORP/ 3days) 29826 Acromioplasty (3 Days)                                                                                                                                             | 21,950.00   |
| 349 | PKG07349 | (ORP/ 2days) 27376 Arthroscopy Knee W/ Biops                                                                                                                                          | 12,000.00   |
| 350 | PKG07350 | (ORP/ 6days) 22634 Spondylolithesis, Spinal Fusion With Reduction - Each Additional Level                                                                                             | 25,650.00   |
| 351 | PKG07351 | (ORP/ 1day) 23505 Closed treatment of clavicular fracture; with manipulation                                                                                                          | 7,700.00    |
| 352 | PKG07352 | (ORP/ 2days) 23515 Open treatment of clavicular fracture, with or without internal or external fixation                                                                               | 15,650.00   |
| 353 | PKG07353 | (ORP/ 1day) 23525 Closed treatment of sternoclavicular dislocation; with manipulation                                                                                                 | 6,350.00    |
| 354 | PKG07354 | (ORP/ 2days) 23530 Open treatment of sternoclavicular dislocation, acute or chronic                                                                                                   | 17,500.00   |
| 355 | PKG07355 | (ORP/ 1day) 23545 Closed treatment of acromioclavicular dislocation; with manipulation                                                                                                | 7,700.00    |
| 356 | PKG07356 | (ORP/ 1day) 23550 Open treatment of acromioclavicular dislocation, acute or chronic;                                                                                                  | 13,800.00   |
| 357 | PKG07357 | (ORP/ 3days) 23615 Open treatment of proximal humeral (surgical or anatomical neck) fracture, with or without internal or external fixation, with or without repair of tuberosity(s); | 23,150.00   |
| 358 | PKG07358 | (ORP/ 1day) 23655 Closed treatment of shoulder dislocation, with manipulation; requiring anesthesia                                                                                   | 6,350.00    |
| 359 | PKG07359 | (ORP/ 1day) 23660 Open treatment of acute shoulder dislocation                                                                                                                        | 13,800.00   |
| 360 | PKG07360 | (ORP/ 1day) 23665 Closed treatment of shoulder dislocation, with fracture of greater humeral tuberosity, with                                                                         | 8,600.00    |
| 361 | PKG07361 | (ORP/ 2days) 23670 Open treatment of shoulder dislocation, with fracture of greater humeral tuberosity, with or without                                                               | 20,250.00   |

Director of Finance

Al-Ahli Hospital





**AL-AHLI HOSPITAL  
PRICE LIST**

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                                                                                                                                                      | PRICE (QAR) |
|-----|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 362 | PKG07362 | (ORP/ 1day) 23675 Closed treatment of shoulder dislocation, with surgical or anatomical neck fracture, with                                                                                                                      | 7,500.00    |
| 363 | PKG07363 | (ORP/ 2days) 23700 Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation)                                                                                                      | 7,800.00    |
| 364 | PKG07364 | (ORP/ 1day) 24505 Closed treatment of humeral shaft fracture; with manipulation, with or without skeletal traction                                                                                                               | 7,700.00    |
| 365 | PKG07365 | (ORP/ 2days) 24515 Open treatment of humeral shaft fracture with plate/screws, with or without cerclage                                                                                                                          | 21,500.00   |
| 366 | PKG07366 | (ORP/ 2days) 24516 Treatment of humeral shaft fracture, with insertion of intramedullary implant, with or without cerclage                                                                                                       | 21,500.00   |
| 367 | PKG07367 | (ORP/ 1day) 24535 Closed treatment of supracondylar or transcondylar humeral fracture, with or without intercondylar extension; with manipulation, with or without skin or skeletal traction                                     | 9,450.00    |
| 368 | PKG07368 | (ORP/ 1day) 24538 Percutaneous skeletal fixation of supracondylar or transcondylar humeral fracture, with or without                                                                                                             | 12,150.00   |
| 369 | PKG07369 | (ORP/ 2days) 24545 Open treatment of humeral supracondylar or transcondylar fracture, with or without internal or external fixation; without intercondylar extension                                                             | 16,250.00   |
| 370 | PKG07370 | (ORP/ 2days) 24546 Open treatment of humeral supracondylar or transcondylar fracture, with or without internal or external fixation; with intercondylar extension                                                                | 19,350.00   |
| 371 | PKG07371 | (ORP/ 1day) 24577 Closed treatment of humeral condylar fracture, medial or lateral; with manipulation                                                                                                                            | 9,450.00    |
| 372 | PKG07372 | (ORP/ 1day) 24579 Open treatment of humeral condylar fracture, medial or lateral, with or without internal or external                                                                                                           | 12,950.00   |
| 373 | PKG07373 | (ORP/ 1day) 24582 Percutaneous skeletal fixation of humeral condylar fracture, medial or lateral, with manipulation                                                                                                              | 12,950.00   |
| 374 | PKG07374 | (ORP/ 2days) 24586 Open treatment of periarticular fracture and/or dislocation of the elbow (fracture distal humerus and proximal ulna and/or proximal radius);                                                                  | 21,500.00   |
| 375 | PKG07375 | (ORP/ 1day) 24605 Treatment of closed elbow dislocation; requiring anesthesia                                                                                                                                                    | 6,350.00    |
| 376 | PKG07376 | (ORP/ 1day) 24640 Closed treatment of radial head subluxation in child, nursemaid elbow, with manipulation                                                                                                                       | 6,350.00    |
| 377 | PKG07377 | (ORP/ 1day) 24655 Closed treatment of radial head or neck fracture; with manipulation                                                                                                                                            | 6,350.00    |
| 378 | PKG07378 | (ORP/ 2days) 24666 Open treatment of radial head or neck fracture, with or without internal fixation or radial head excision; with radial head prosthetic replacement                                                            | 21,400.00   |
| 379 | PKG07379 | (ORP/ 2days) 24685 Open treatment of ulnar fracture proximal end (olecranon process), with or without internal or                                                                                                                | 15,650.00   |
| 380 | PKG07380 | (ORP/ 2days) 25337 Reconstruction for stabilization of unstable distal ulna or distal radioulnar joint, secondary by soft tissue stabilization (eg, tendon transfer, tendon graft or weave, or tenodesis) with or without open   | 21,500.00   |
| 381 | PKG07381 | (ORP/ 2days) 25440 Repair of nonunion, scaphoid carpal (navicular) bone, with or without radial styloidectomy (includes obtaining graft and necessary fixation)                                                                  | 16,800.00   |
| 382 | PKG07382 | (ORP/ 1day) 25505 Closed treatment of radial shaft fracture; with manipulation                                                                                                                                                   | 7,700.00    |
| 383 | PKG07383 | (ORP/ 2days) 25515 Open treatment of radial shaft fracture, with or without internal or external fixation                                                                                                                        | 15,650.00   |
| 384 | PKG07384 | (ORP/ 1day) 25520 Closed treatment of radial shaft fracture and closed treatment of dislocation of distal radioulnar joint                                                                                                       | 15,400.00   |
| 385 | PKG07385 | (ORP/ 2days) 25526 Open treatment of radial shaft fracture, with internal and/or external fixation and open treatment, with or without internal or external fixation of distal radioulnar joint (Galeazzi fracture/dislocation), | 16,250.00   |
| 386 | PKG07386 | (ORP/ 1day) 25535 Closed treatment of ulnar shaft fracture; with manipulation                                                                                                                                                    | 4,700.00    |
| 387 | PKG07387 | (ORP/ 2days) 25545 Open treatment of ulnar shaft fracture, with or without internal or external fixation                                                                                                                         | 11,650.00   |
| 388 | PKG07388 | (ORP/ 1day) 25565 Closed treatment of radial and ulnar shaft fractures; with manipulation                                                                                                                                        | 9,600.00    |
| 389 | PKG07389 | (ORP/ 2days) 25575 Open treatment of radial AND ulnar shaft fractures, with internal or external fixation; of radius AND                                                                                                         | 11,400.00   |

Nusrat El-Ahwal (MBA, FCA, ACCA)  
Director of Finance  
Al-Ahli Hospital

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12/10/17  
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**AL-AHLI HOSPITAL  
PRICE LIST**

استشفى الأهلي  
AL-AHLI HOSPITAL

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                                                                                                      | PRICE (QAR) |
|-----|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 390 | PKG07390 | (ORP/ 1day) 25605 Closed treatment of distal radial fracture (eg, Colles or Smith type) or epiphyseal separation, with or without fracture of ulnar styloid; with manipulation   | 14,550.00   |
| 391 | PKG07391 | (ORP/ 1day) 25606 Percutaneous skeletal fixation of distal radial fracture or epiphyseal separation                                                                              | 9,450.00    |
| 392 | PKG07392 | (ORP/ 2days) 25607 Open treatment of distal radial extra-articular fracture or epiphyseal separation, with internal fixation                                                     | 16,250.00   |
| 393 | PKG07393 | (ORP/ 2days) 25608 Open treatment of distal radial intra-articular fracture or epiphyseal separation; with internal fixation                                                     | 16,250.00   |
| 394 | PKG07394 | (ORP/ 2days) 25628 Open treatment of carpal scaphoid (navicular) fracture, with or without internal or external fixation                                                         | 15,650.00   |
| 395 | PKG07395 | (ORP/ 1day) 25635 Closed treatment of carpal bone fracture (excluding carpal scaphoid (navicular)); with manipulation,                                                           | 7,700.00    |
| 396 | PKG07396 | (ORP/ 2days) 25645 Open treatment of carpal bone fracture (other than carpal scaphoid (navicular)), each bone                                                                    | 14,250.00   |
| 397 | PKG07397 | (ORP/ 1day) 25652 Open treatment of ulnar styloid fracture                                                                                                                       | 11,800.00   |
| 398 | PKG07398 | (ORP/ 1day) 25660 Closed treatment of radiocarpal or intercarpal dislocation, one or more bones, with manipulation                                                               | 7,700.00    |
| 399 | PKG07399 | (ORP/ 2days) 25670 Open treatment of radiocarpal or intercarpal dislocation, one or more bones                                                                                   | 14,250.00   |
| 400 | PKG07400 | (ORP/ 1day) 25675 Closed treatment of distal radioulnar dislocation with manipulation                                                                                            | 7,700.00    |
| 401 | PKG07401 | (ORP/ 2days) 25676 Open treatment of distal radioulnar dislocation, acute or chronic                                                                                             | 13,100.00   |
| 402 | PKG07402 | (ORP/ 1day) 25680 Closed treatment of trans-scaphoperilunar type of fracture dislocation, with manipulation                                                                      | 8,700.00    |
| 403 | PKG07403 | (ORP/ 2days) 25685 Open treatment of trans-scaphoperilunar type of fracture dislocation                                                                                          | 16,250.00   |
| 404 | PKG07404 | (ORP/ 2days) 25695 Open treatment of lunate dislocation                                                                                                                          | 13,950.00   |
| 405 | PKG07405 | (ORP/ 1day) 26607 Closed treatment of metacarpal fracture, with manipulation, with external fixation, each bone                                                                  | 9,450.00    |
| 406 | PKG07406 | (ORP/ 1day) 26608 Percutaneous skeletal fixation of metacarpal fracture, each bone                                                                                               | 9,200.00    |
| 407 | PKG07407 | (ORP/ 2days) 26615 Open treatment of metacarpal fracture, single, with or without internal or external fixation, each bone                                                       | 11,150.00   |
| 408 | PKG07408 | (ORP/ 1day) 26641 Closed treatment of carpometacarpal dislocation, thumb, with manipulation                                                                                      | 6,650.00    |
| 409 | PKG07409 | (ORP/ 1day) 26650 Percutaneous skeletal fixation of carpometacarpal fracture dislocation, thumb (Bennett fracture), with manipulation, with or without external fixation         | 9,200.00    |
| 410 | PKG07410 | (ORP/ 2days) 26665 Open treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), with or without                                                             | 11,150.00   |
| 411 | PKG07411 | (ORP/ 1day) 26675 Closed treatment of carpometacarpal dislocation, other than thumb, with manipulation, each joint;                                                              | 7,700.00    |
| 412 | PKG07412 | (ORP/ 1day) 26676 Percutaneous skeletal fixation of carpometacarpal dislocation, other than thumb, with manipulation,                                                            | 9,200.00    |
| 413 | PKG07413 | (ORP/ 2days) 26685 Open treatment of carpometacarpal dislocation, other than thumb; with or without internal or                                                                  | 11,150.00   |
| 414 | PKG07414 | (ORP/ 2days) 26715 Open treatment of metacarpophalangeal dislocation, single, with or without internal or external                                                               | 11,150.00   |
| 415 | PKG07415 | (ORP/ 1day) 26725 Closed treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb; with manipulation, with or without skin or skeletal traction, each | 7,700.00    |
| 416 | PKG07416 | (ORP/ 1day) 26727 Percutaneous skeletal fixation of unstable phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with manipulation, each                     | 9,200.00    |
| 417 | PKG07417 | (ORP/ 2days) 26735 Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external fixation, each                 | 15,000.00   |
| 418 | PKG07418 | (ORP/ 1day) 26742 Closed treatment of articular fracture, involving metacarpophalangea or interphalangeal joint; with                                                            | 7,700.00    |

Mustafa El-Ahwal (MBA, FCA, ACCA)  
Director of Finance  
Al-Ahli Hospital

APPROVED  
10/1/17





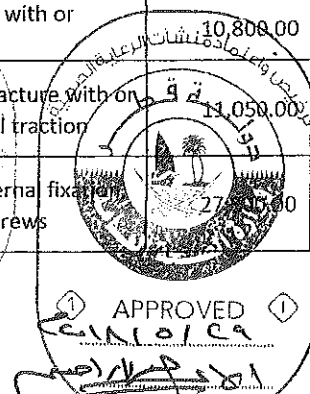
# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                                                                                                                               | PRICE (QAR) |
|-----|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 419 | PKG07419 | (ORP/ 2days) 26746 Open treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint, with or without internal or external fixation, each                                      | 12,500.00   |
| 420 | PKG07420 | (ORP/ 1day) 26755 Closed treatment of distal phalangeal fracture, finger or thumb; with manipulation, each                                                                                                | 7,700.00    |
| 421 | PKG07421 | (ORP/ 1day) 26756 Percutaneous skeletal fixation of distal phalangeal fracture, finger or thumb, each                                                                                                     | 9,200.00    |
| 422 | PKG07422 | (ORP/ 2days) 26765 Open treatment of distal phalangeal fracture, finger or thumb, with or without internal or external                                                                                    | 12,500.00   |
| 423 | PKG07423 | (ORP/ 1day) 26775 Closed treatment of interphalangeal joint dislocation, single, with manipulation; requiring anesthesia                                                                                  | 7,700.00    |
| 424 | PKG07424 | (ORP/ 1day) 26776 Percutaneous skeletal fixation of interphalangeal joint dislocation, single, with manipulation                                                                                          | 9,200.00    |
| 425 | PKG07425 | (ORP/ 2days) 26785 Open treatment of interphalangeal joint dislocation, with or without internal or external fixation, single                                                                             | 11,250.00   |
| 426 | PKG07426 | (ORP/ 3days) 27232 Closed treatment of femoral fracture, proximal end, neck; with manipulation, with or without skeletal                                                                                  | 13,100.00   |
| 427 | PKG07427 | (ORP/ 3days) 27235 Percutaneous skeletal fixation of femoral fracture, proximal end, neck                                                                                                                 | 15,800.00   |
| 428 | PKG07428 | (ORP/ 3days) 27236 Open treatment of femoral fracture, proximal end, neck, internal fixation or prosthetic replacement                                                                                    | 22,500.00   |
| 429 | PKG07429 | (ORP/ 3days) 27240 Closed treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture; with manipulation, with or without skin or skeletal traction                              | 13,600.00   |
| 430 | PKG07430 | (ORP/ 3days) 27244 Treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture; with plate/screw type implant, with or without cerclage                                          | 27,800.00   |
| 431 | PKG07431 | (ORP/ 3days) 27245 Treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture; with intramedullary implant, with or without interlocking screws and/or cerclage                 | 27,800.00   |
| 432 | PKG07432 | (ORP/ 3days) 27248 Open treatment of greater trochanteric fracture, with or without internal or external fixation                                                                                         | 20,200.00   |
| 433 | PKG07433 | (ORP/ 2days) 27252 Closed treatment of hip dislocation, traumatic; requiring anesthesia                                                                                                                   | 11,850.00   |
| 434 | PKG07434 | (ORP/ 3days) 27253 Open treatment of hip dislocation, traumatic, without internal fixation                                                                                                                | 18,100.00   |
| 435 | PKG07435 | (ORP/ 3days) 27254 Open treatment of hip dislocation, traumatic, with acetabular wall and femoral head fracture, with or without internal or external fixation                                            | 23,350.00   |
| 436 | PKG07436 | (ORP/ 2days) 27257 Treatment of spontaneous hip dislocation (developmental, including congenital or pathological), by abduction, splint or traction; with manipulation, requiring anesthesia              | 10,800.00   |
| 437 | PKG07437 | (ORP/ 5days) 27258 Open treatment of spontaneous hip dislocation (developmental, including congenital or pathological), replacement of femoral head in acetabulum (including tenotomy, etc)               | 26,900.00   |
| 438 | PKG07438 | (ORP/ 5days) 27259 Open treatment of spontaneous hip dislocation (developmental, including congenital or pathological), replacement of femoral head in acetabulum (including tenotomy, etc); with femoral | 33,300.00   |
| 439 | PKG07439 | (ORP/ 2days) 27266 Closed treatment of post hip arthroplasty dislocation; requiring regional or general anesthesia                                                                                        | 7,800.00    |
| 440 | PKG07440 | (ORP/ 2days) 27501 Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar                                                                                      | 10,800.00   |
| 441 | PKG07441 | (ORP/ 2days) 27502 Closed treatment of femoral shaft fracture, with manipulation, with or without skin or skeletal traction                                                                               | 10,800.00   |
| 442 | PKG07442 | (ORP/ 2days) 27503 Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar extension, with manipulation, with or without skin or skeletal traction              | 11,050.00   |
| 443 | PKG07443 | (ORP/ 3days) 27506 Open treatment of femoral shaft fracture, with or without external fixation with insertion of intramedullary implant, with or without cerclage and/or locking screws                   | 27,300.00   |

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# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                                                                                                                                            | PRICE (QAR) |
|-----|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 444 | PKG07444 | (ORP/ 3days) 27507 Open treatment of femoral shaft fracture with plate/screws, with or without cerclage                                                                                                                | 23,100.00   |
| 445 | PKG07445 | (ORP/ 2days) 27508 Closed treatment of femoral fracture, distal end, medial or lateral condyle, without manipulation                                                                                                   | 10,800.00   |
| 446 | PKG07446 | (ORP/ 3days) 27509 Percutaneous skeletal fixation of femoral fracture, distal end, medial or lateral condyle, or supracondylar or transcondylar, with or without intercondylar extension, or distal femoral epiphyseal | 14,550.00   |
| 447 | PKG07447 | (ORP/ 2days) 27510 Closed treatment of femoral fracture, distal end, medial or lateral condyle, with manipulation                                                                                                      | 10,800.00   |
| 448 | PKG07448 | (ORP/ 3days) 27511 Open treatment of femoral supracondylar or transcondylar fracture without intercondylar extension, with or without internal or external fixation                                                    | 23,100.00   |
| 449 | PKG07449 | (ORP/ 3days) 27513 Open treatment of femoral supracondylar or transcondylar fracture with intercondylar extension, with or without internal or external fixation                                                       | 27,800.00   |
| 450 | PKG07450 | (ORP/ 3days) 27514 Open treatment of femoral fracture, distal end, medial or lateral condyle, with or without internal or external                                                                                     | 27,800.00   |
| 451 | PKG07451 | (ORP/ 2days) 27517 Closed treatment of distal femoral epiphyseal separation; with manipulation, with or without skin                                                                                                   | 13,950.00   |
| 452 | PKG07452 | (ORP/ 2days) 27519 Open treatment of distal femoral epiphyseal separation, with or without internal or external fixation                                                                                               | 16,250.00   |
| 453 | PKG07453 | (ORP/ 2days) 27524 Open treatment of patellar fracture, with internal fixation and/or partial or complete patellectomy                                                                                                 | 16,250.00   |
| 454 | PKG07454 | (ORP/ 2days) 27532 Closed treatment of tibial fracture, proximal (plateau); with or without manipulation, with skeletal                                                                                                | 13,100.00   |
| 455 | PKG07455 | (ORP/ 3days) 27535 Open treatment of tibial fracture, proximal (plateau); unicondylar, with or without internal or external                                                                                            | 22,300.00   |
| 456 | PKG07456 | (ORP/ 2days) 27538 Closed treatment of intercondylar spine(s) and/or tuberosity fracture(s) of knee, with or without                                                                                                   | 12,750.00   |
| 457 | PKG07457 | (ORP/ 3days) 27540 Open treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without                                                                                                 | 16,000.00   |
| 458 | PKG07458 | (ORP/ 1day) 27552 Closed treatment of knee dislocation; requiring anesthesia                                                                                                                                           | 7,700.00    |
| 459 | PKG07459 | (ORP/ 3days) 27556 Open treatment of knee dislocation, with or without internal or external fixation; without primary ligamentous repair or augmentation/reconstruction                                                | 22,300.00   |
| 460 | PKG07460 | (ORP/ 1day) 27562 Closed treatment of patellar dislocation; requiring anesthesia                                                                                                                                       | 6,350.00    |
| 461 | PKG07461 | (ORP/ 2days) 27566 Open treatment of patellar dislocation, with or without partial or total patellectomy                                                                                                               | 15,650.00   |
| 462 | PKG07462 | (ORP/ 1day) 27752 Closed treatment of tibial shaft fracture (with or without fibular fracture); with manipulation                                                                                                      | 9,450.00    |
| 463 | PKG07463 | (ORP/ 2days) 27756 Percutaneous skeletal fixation of tibial shaft fracture (with or without fibular fracture)                                                                                                          | 12,500.00   |
| 464 | PKG07464 | (ORP/ 3days) 27758 Open treatment of tibial shaft fracture, (with or without fibular fracture) with plate/screws                                                                                                       | 21,450.00   |
| 465 | PKG07465 | (ORP/ 3days) 27759 Treatment of tibial shaft fracture (with or without fibular fracture) by intramedullary implant, with or without interlocking screws and/or cerclage                                                | 21,450.00   |
| 466 | PKG07466 | (ORP/ 1day) 27762 Closed treatment of medial malleolus fracture; with manipulation, with or without skin or skeletal                                                                                                   | 8,900.00    |
| 467 | PKG07467 | (ORP/ 2days) 27766 Open treatment of medial malleolus fracture, with or without internal or external fixation                                                                                                          | 13,100.00   |
| 468 | PKG07468 | (ORP/ 2days) 27784 Open treatment of proximal fibula or shaft fracture, with or without internal or external fixation                                                                                                  | 13,100.00   |
| 469 | PKG07469 | (ORP/ 1day) 27788 Closed treatment of distal fibular fracture (lateral malleolus); with manipulation                                                                                                                   | 7,700.00    |
| 470 | PKG07470 | (ORP/ 2days) 27792 Open treatment of distal fibular fracture (lateral malleolus); with or without internal or external                                                                                                 | 12,500.00   |

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Director of Finance  
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# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                                                                                                                                        | PRICE (QAR) |
|-----|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 471 | PKG07471 | (ORP/ 1day) 27810 Closed treatment of bimalleolar ankle fracture, (including Potts); with manipulation                                                                                                             | 11,550.00   |
| 472 | PKG07472 | (ORP/ 2days) 27814 Open treatment of bimalleolar ankle fracture, with or without internal or external fixation                                                                                                     | 17,250.00   |
| 473 | PKG07473 | (ORP/ 2days) 27823 Open treatment of trimalleolar ankle fracture, with or without internal or external fixation, medial and/or lateral malleolus; with fixation of posterior lip                                   | 18,150.00   |
| 474 | PKG07474 | (ORP/ 1day) 27825 Closed treatment of fracture of weight bearing articular portion of distal tibia (eg, pilon or tibial plafond), with or without anesthesia; with skeletal traction and/or requiring manipulation | 14,550.00   |
| 475 | PKG07475 | (ORP/ 2days) 27828 Open treatment of fracture of weight bearing articular surface/portion of distal tibia (eg, pilon or tibial plafond), with internal or external fixation; of both tibia and fibula              | 21,250.00   |
| 476 | PKG07476 | (ORP/ 1day) 27829 Open treatment of distal tibiofibular joint (syndesmosis) disruption, with or without internal                                                                                                   | 11,800.00   |
| 477 | PKG07477 | (ORP/ 1day) 27831 Closed treatment of proximal tibiofibular joint dislocation; requiring anesthesia                                                                                                                | 8,900.00    |
| 478 | PKG07478 | (ORP/ 1day) 27832 Open treatment of proximal tibiofibular joint dislocation, with or without internal or external fixation, or with excision of proximal fibula                                                    | 12,450.00   |
| 479 | PKG07479 | (ORP/ 1day) 27842 Closed treatment of ankle dislocation; requiring anesthesia, with or without percutaneous skeletal                                                                                               | 7,700.00    |
| 480 | PKG07480 | (ORP/ 2days) 27848 Open treatment of ankle dislocation, with or without percutaneous skeletal fixation; with repair or                                                                                             | 13,100.00   |
| 481 | PKG07481 | (ORP/ 1day) 27860 Manipulation of ankle under general anesthesia (includes application of traction or other fixation                                                                                               | 6,350.00    |
| 482 | PKG07482 | (ORP/ 2days) 28405 Closed treatment of calcaneal fracture; with manipulation                                                                                                                                       | 10,650.00   |
| 483 | PKG07483 | (ORP/ 2days) 28406 Percutaneous skeletal fixation of calcaneal fracture, with manipulation                                                                                                                         | 12,500.00   |
| 484 | PKG07484 | (ORP/ 3days) 28415 Open treatment of calcaneal fracture, with or without internal or external fixation                                                                                                             | 27,800.00   |
| 485 | PKG07485 | (ORP/ 3days) 28420 Open treatment of calcaneal fracture, with or without internal or external fixation; with primary iliac or other autogenous bone graft (includes obtaining graft)                               | 27,800.00   |
| 486 | PKG07486 | (ORP/ 2days) 28435 Closed treatment of talus fracture; with manipulation                                                                                                                                           | 10,800.00   |
| 487 | PKG07487 | (ORP/ 2days) 28436 Percutaneous skeletal fixation of talus fracture, with manipulation                                                                                                                             | 13,100.00   |
| 488 | PKG07488 | (ORP/ 3days) 28445 Open treatment of talus fracture, with or without internal or external fixation                                                                                                                 | 27,800.00   |
| 489 | PKG07489 | (ORP/ 2days) 28455 Treatment of tarsal bone fracture (except talus and calcaneus); with manipulation, each                                                                                                         | 10,500.00   |
| 490 | PKG07490 | (ORP/ 3days) 28456 Percutaneous skeletal fixation of tarsal bone fracture (except talus and calcaneus), with                                                                                                       | 12,900.00   |
| 491 | PKG07491 | (ORP/ 3days) 28465 Open treatment of tarsal bone fracture (except talus and calcaneus), with or without internal                                                                                                   | 18,450.00   |
| 492 | PKG07492 | (ORP/ 1day) 28475 Closed treatment of metatarsal fracture; with manipulation, each                                                                                                                                 | 6,350.00    |
| 493 | PKG07493 | (ORP/ 1day) 28476 Percutaneous skeletal fixation of metatarsal fracture, with manipulation, each                                                                                                                   | 8,700.00    |
| 494 | PKG07494 | (ORP/ 2days) 28485 Open treatment of metatarsal fracture, with or without internal or external fixation, each                                                                                                      | 10,800.00   |
| 495 | PKG07495 | (ORP/ 1day) 28495 Closed treatment of fracture great toe, phalanx or phalanges; with manipulation                                                                                                                  | 6,350.00    |
| 496 | PKG07496 | (ORP/ 2days) 28496 Percutaneous skeletal fixation of fracture great toe, phalanx or phalanges, with manipulation                                                                                                   | 10,400.00   |
| 497 | PKG07497 | (ORP/ 2days) 28505 Open treatment of fracture great toe, phalanx or phalanges, with or without internal or external                                                                                                | 10,800.00   |
| 498 | PKG07498 | (ORP/ 1day) 28515 Closed treatment of fracture, phalanx or phalanges, other than great toe with manipulation, each                                                                                                 | 6,350.00    |

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Al-Ahli Hospital

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# AL-AHLI HOSPITAL PRICE LIST

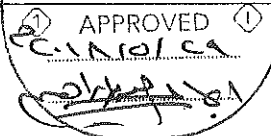
Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                                               | PRICE (QAR) |
|-----|----------|---------------------------------------------------------------------------------------------------------------------------|-------------|
| 499 | PKG07499 | (ORP/ 1day) 28525 Open treatment of fracture, phalanx or phalanges, other than great toe, with or without internal or     | 9,450.00    |
| 500 | PKG07500 | (ORP/ 1day) 28531 Open treatment of sesamoid fracture, with or without internal fixation                                  | 9,450.00    |
| 501 | PKG07501 | (ORP/ 1day) 28545 Closed treatment of tarsal bone dislocation, other than talotarsal; requiring anesthesia                | 7,700.00    |
| 502 | PKG07502 | (ORP/ 1day) 28546 Percutaneous skeletal fixation of tarsal bone dislocation, other than talotarsal, with manipulation     | 8,700.00    |
| 503 | PKG07503 | (ORP/ 1day) 28555 Open treatment of tarsal bone dislocation, with or without internal or external fixation                | 9,450.00    |
| 504 | PKG07504 | (ORP/ 1day) 28575 Closed treatment of talotarsal joint dislocation; requiring anesthesia                                  | 6,350.00    |
| 505 | PKG07505 | (ORP/ 1day) 28576 Percutaneous skeletal fixation of talotarsal joint dislocation, with manipulation                       | 7,700.00    |
| 506 | PKG07506 | (ORP/ 2days) 28585 Open treatment of talotarsal joint dislocation, with or without internal or external fixation          | 10,800.00   |
| 507 | PKG07507 | (ORP/ 1day) 28605 Closed treatment of tarsometatarsal joint dislocation; requiring anesthesia                             | 6,350.00    |
| 508 | PKG07508 | (ORP/ 1day) 28606 Percutaneous skeletal fixation of tarsometatarsal joint dislocation, with manipulation                  | 7,700.00    |
| 509 | PKG07509 | (ORP/ 2days) 28615 Open treatment of tarsometatarsal joint dislocation, with or without internal or external fixation     | 10,800.00   |
| 510 | PKG07510 | (ORP/ 1day) 28635 Closed treatment of metatarsophalangeal joint dislocation; requiring anesthesia                         | 6,350.00    |
| 511 | PKG07511 | (ORP/ 1day) 28636 Percutaneous skeletal fixation of metatarsophalangeal joint dislocation, with manipulation              | 7,700.00    |
| 512 | PKG07512 | (ORP/ 2days) 28645 Open treatment of metatarsophalangeal joint dislocation, with or without internal or external fixation | 10,800.00   |
| 513 | PKG07513 | (ORP/ 1day) 28665 Closed treatment of interphalangeal joint dislocation; requiring anesthesia                             | 6,350.00    |
| 514 | PKG07514 | (ORP/ 1day) 28666 Percutaneous skeletal fixation of interphalangeal joint dislocation, with manipulation                  | 7,700.00    |
| 515 | PKG07515 | (ORP/ 1day) 28675 Open treatment of interphalangeal joint dislocation, with or without internal or external fixation      | 9,450.00    |
| 516 | PKG07516 | (ORP/ 3days) Primary open reduction of long bone with fixation                                                            | 23,800.00   |
| 517 | PKG07517 | (ORP/ 3days) Primary open reduction of intra-articular fracture of long bone                                              | 23,800.00   |
| 518 | PKG07518 | (ORP/ 3days) Secondary open reduction of fractured long bone for non-union/                                               | 23,800.00   |
| 519 | PKG07519 | (ORP/ 5days) Locked intramedullary nailing of fractured long bone                                                         | 28,850.00   |
| 520 | PKG07520 | (ORP/ 5days) Closed reduction of fracture of long bone with external fixation                                             | 27,800.00   |
| 521 | PKG07521 | (ORP/ 3days) Closed reduction of fracture of long bone- including cast                                                    | 22,300.00   |
| 522 | PKG07522 | (ORP/ 2days) Primary ORIF of small bone with fixation including intra-articu                                              | 19,350.00   |
| 523 | PKG07523 | (ORP/ 2days) Secondary open reduction of fracture of small bone for non-unio                                              | 21,100.00   |
| 524 | PKG07524 | (ORP/ 2days) Closed reduction of fracture of small bone with external fixato                                              | 20,150.00   |
| 525 | PKG07525 | (ORP/ 2days) Closed reduction of fracture of small bone- including cast or p                                              | 21,100.00   |
| 526 | PKG07526 | (ORP/ 5days) Primary reduction of fracture of neck of femur and internal                                                  | 29,300.00   |
| 527 | PKG07527 | (ORP/ 7days) ORIF of both columns of acetabulum                                                                           | 45,000.00   |
| 528 | PKG07528 | (ORP/ 7days) ORIF plus bone graft symphysis pubis                                                                         | 34,500.00   |
| 529 | PKG07529 | (ORP/ 5days) ORIF of fractures of the greater trochanter                                                                  | 29,300.00   |
| 530 | PKG07530 | (ORP/ 1day) Primary closed reduction of fracture or dislocation of joint POP                                              | 13,800.00   |
| 531 | PKG07531 | (ORP/ 1day) Primary open reduction of dislocation of small joint                                                          | 17,000.00   |
| 532 | PKG07532 | (ORP/ 2days) Primary open reduction of dislocation of large joint                                                         | 18,250.00   |
| 533 | PKG07533 | (ORP/ 1day) Secondary open reduction of dislocation of small joint                                                        | 13,800.00   |
| 534 | PKG07534 | (ORP/ 2days) Secondary open reduction of dislocation of large joint with                                                  | 17,000.00   |
| 535 | PKG07535 | (ORP/ 1day) Change of cast under general anaesthetic                                                                      | 5,000.00    |
| 536 | PKG07536 | (ORP/ 5days) Joints- including replacement/reconstruction                                                                 | 33,300.00   |
| 537 | PKG07537 | (ORP/ 1day) Total synovectomy of small joint                                                                              | 9,450.00    |

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Director of Finance

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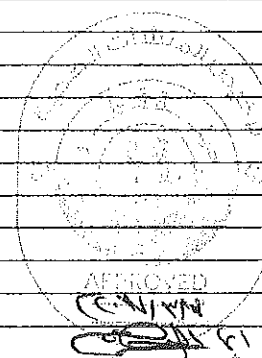




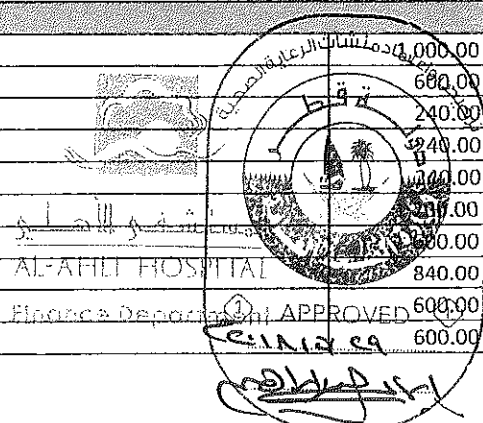
# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR                                    | CODE     | DESCRIPTION                                                                                       | PRICE (QAR) |
|---------------------------------------|----------|---------------------------------------------------------------------------------------------------|-------------|
| 538                                   | PKG07538 | (ORP/ 1day) Total synovectomy of large joint                                                      | 14,450.00   |
| 539                                   | PKG07539 | (ORP/ 2days) Arthrotomy of large joint- including removal of loose body                           | 9,700.00    |
| 540                                   | PKG07540 | (ORP/ 1day) Arthrotomy of small joint- including removal of loose body                            | 7,500.00    |
| 541                                   | PKG07541 | (ORP/ 3days) 22114 Microdiscectomy                                                                | 27,800.00   |
| 542                                   | PKG07542 | (ORP/ 1day) 29445 Application of a rigid cast (Full Limb)                                         | 3,550.00    |
| 543                                   | PKG07543 | (ORP/ 1day) 29445 Application of a rigid cast (Half Limb)                                         | 3,150.00    |
| 544                                   | PKG07544 | (ORP/ 3days) 27695 Reconstruction of lateral ligament                                             | 21,000.00   |
| 545                                   | PKG07545 | (ORP/ 1days) 27415 Allograft (Cartilage Implant)                                                  | 24,650.00   |
| <b>Clinical Services / Procedures</b> |          |                                                                                                   |             |
| 1                                     | ORP0001  | Change cast without general anaesthesia ( X -4810)                                                | 780.00      |
| 2                                     | ORP0002  | Closed reduction of fractures including cast (W2582)                                              | 780.00      |
| 3                                     | ORP0003  | Closed reduction of fracture of long bone, including cast (W2502)                                 | 780.00      |
| 4                                     | ORP0004  | Primary closed reduction of joint including cast application (W6630)                              | 780.00      |
| 5                                     | ORP0005  | Removal of fixator/frame/pins and change of plaster(W3032)                                        | 780.00      |
| 6                                     | ORP0006  | Removal of skeletal traction from bone (W2930)                                                    | 300.00      |
| 7                                     | ORP0007  | Application of external fixation to bone (W3010)                                                  | 2,940.00    |
| 8                                     | ORP0008  | Removal of external fixation from bone (W3030)                                                    | 300.00      |
| 9                                     | ORP0009  | application of skeletal traction to bone (W2910)                                                  | 300.00      |
| 10                                    | ORP0010  | Therapeutic local anaesthetics/aspiration of joint (W9013)                                        | 780.00      |
| 11                                    | ORP0011  | Removal of foreign body in deeper tissue (S4480)                                                  | 780.00      |
| 12                                    | ORP0012  | Measurement of compartment pressure with manometer (A8460)                                        | 780.00      |
| 13                                    | ORP0013  | Aspiration of subcutaneous haematoma (S4780)                                                      | 780.00      |
| 14                                    | ORP0014  | Injection into a joint without X-ray control (W9040)                                              | 780.00      |
| 15                                    | ORP0015  | Injection into subcutaneous tissue/painful trigger point (S5210)                                  | 780.00      |
| 16                                    | ORP0016  | Drainage of lesion (S4720)                                                                        | 780.00      |
| 17                                    | ORP0017  | Surgical toilet and debridement of deep wound (S5730)                                             | 780.00      |
| 18                                    | ORP0018  | Incision and drainage                                                                             | 780.00      |
| 19                                    | ORP0019  | Removal of sutures                                                                                | 300.00      |
| 20                                    | ORP0020  | Debridement & primary suture of wound (S4212)                                                     | 780.00      |
| 21                                    | ORP0021  | Orthopedic ESWT                                                                                   | 1,200.00    |
| 22                                    | ORP0022  | Tracheostomy                                                                                      | 10,000.00   |
| 23                                    | ORP0023  | Emergency Mediastinal re-exploration (Re-Bleed,Temponade,Graft Rev.Infectetion.)                  | 12,000.00   |
| 24                                    | ORP0024  | Ultrasound-guided PRP injections                                                                  | 5,000.00    |
| 25                                    | ORP0025  | Acute I.V pain management 4 hours(In-Clinic)                                                      | 5,000.00    |
| 26                                    | ORP0026  | Wound debridement and application of portable vac pump(Excluding Vac Pump charge)                 | 1,275.00    |
| 27                                    | ORP0027  | Application of dynamic splints                                                                    | 1,200.00    |
| 28                                    | ORP0028  | Closed reduction of fracture/joint dislocation and cast application under local anesthesia and x- | 2,500.00    |



| <b>PEDIATRIC</b>                      |          |                                                    |          |
|---------------------------------------|----------|----------------------------------------------------|----------|
| <b>Packages</b>                       |          |                                                    |          |
| 1                                     | PKG12001 | (NSY / 02 Days) Normal Baby Care Per Single Baby   | 900.00   |
| 2                                     | PKG12002 | (NSY / 04 Days) Normal Baby Care Per Single Baby   | 1,800.00 |
| 3                                     | PKG12003 | (NSY / 05 Days) Normal Baby Care Per Single Baby   | 2,250.00 |
| <b>Clinical Services / Procedures</b> |          |                                                    |          |
| 1                                     | NCU0001  | NICU - Nasal CPAP - 1 Day (24 hours)               | 4,000.00 |
| 2                                     | NCU0002  | NICU - Intravenous fluids - 1 Day (24 hours)       | 600.00   |
| 3                                     | NCU0003  | NICU - Oxygen via nasal cannula - 1 Day (24 hours) | 240.00   |
| 4                                     | NCU0004  | NICU - Oxygen via face mask - 1 Day (24 hours)     | 240.00   |
| 5                                     | NCU0005  | NICU - Oxygen via incubator - 1 Day (24 hours)     | 240.00   |
| 6                                     | NCU0006  | NICU - Mechanical Ventilation - 1 Day (24 hours)   | 3,000.00 |
| 7                                     | NCU0007  | NICU - Single Phototherapy - 1 Day (24 hours)      | 1,000.00 |
| 8                                     | NCU0008  | NICU - Double Phototherapy - 1 Days (24 hours)     | 840.00   |
| 9                                     | NCU0009  | NICU - Chest tube insertion (Ex. Consumables)      | 600.00   |
| 10                                    | NCU0010  | NICU - Lumbar puncture (Ex. Consumables)           | 600.00   |



Director of Finance  
Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE    | DESCRIPTION                                               | PRICE (QAR) |
|----|---------|-----------------------------------------------------------|-------------|
| 11 | NCU0011 | NICU - Suprapubic aspiration (Ex. Consumables)            | 200.00      |
| 12 | NCU0012 | NICU - Bladder catheterization (Ex. Consumables)          | 200.00      |
| 13 | NCU0013 | NICU - OG Tube insertion (Ex. Consumables)                | 120.00      |
| 14 | NCU0014 | NICU - Umbilical artery catheterization (Ex. Consumables) | 600.00      |
| 15 | NCU0015 | NICU - Umbilical vein catheterization (Ex. Consumables)   | 600.00      |
| 16 | NCU0016 | NICU - Insertion of arterial catheter (Ex. Consumables)   | 360.00      |
| 17 | NCU0017 | NICU - Chest Physiotherapy per session                    | 200.00      |
| 18 | NCU0018 | NICU - New born Resuscitation                             | 600.00      |
| 19 | NCU0019 | NICU - Daily management of sick new born                  | 700.00      |
| 20 | NCU0020 | NICU - ET incubation                                      | 600.00      |
| 21 | NCU0021 | NICU - Intravenous Antibiotics                            | 600.00      |
| 22 | NCU0022 | NICU - Arterial Blood gases (ABG)                         | 300.00      |
| 23 | NCU0023 | NICU - Surfactant Replacement Therapy                     | 300.00      |

| PHYSICAL REHABILITATION        |          |                                                                                    |           |
|--------------------------------|----------|------------------------------------------------------------------------------------|-----------|
| Packages                       |          |                                                                                    |           |
| 1                              | PKG10001 | (PRM / 01 Day) X-ray guided intrarticular sacroiliac joint injection               | 7,400.00  |
| 2                              | PKG10002 | (PRM / 01 Day) X-ray guided Selective Nerve Root Block                             | 7,400.00  |
| 3                              | PKG10003 | (PRM / 01 Day) X-ray guided Foraminal Epidural                                     | 7,400.00  |
| 4                              | PKG10004 | (PRM / 01 Day) Ultrasound or X-ray guided Caudal epidural                          | 7,400.00  |
| 5                              | PKG10005 | (PRM / 01 Day) U/S guide intratrical Facet Joint Inject/cervical, thoracic, lumbar | 7,400.00  |
| 6                              | PKG10006 | (PRM / 01 Day) X-ray guided Coccygeal Joint Injection                              | 7,400.00  |
| 7                              | PKG10007 | (PRM / 01 Day) Ultrasound-Guided intercostal nerve block                           | 7,400.00  |
| 8                              | PKG10008 | (PRM / 01 Day) X-Ray Guided Lumbar Medial Branch Block with LA and Steroid         | 7,400.00  |
| 9                              | PKG10009 | (PRM / 01 Day) X-Ray Guided Lumbar Medial Branch Facet Radiofrequency Neurotomy    | 23,100.00 |
| 10                             | PKG10010 | (PRM / 01 Day) Ultrasound Guided Peripheal Nerve Pulsed Radiofrequency Neurotom    | 7,400.00  |
| 11                             | PKG10011 | (PRM / 01 Day) Ultrasound-Guided Stellate Ganglion block                           | 11,400.00 |
| 12                             | PKG10012 | (PRM / 02 Days) Coeliac Plexus Block                                               | 14,200.00 |
| Clinical Services / Procedures |          |                                                                                    |           |
| 1                              | PRM0001  | Non-guided Intra-articular therapeutic injection or aspiration                     | 780.00    |
| 2                              | PRM0002  | Ultrasound-Guided Intra-articular Injection and/or aspiration                      | 1,500.00  |
| 3                              | PRM0003  | Ultrasound-Guided Bursa Injection and/or Aspiration                                | 1,500.00  |
| 4                              | PRM0004  | Ultrasound-Guided Sacroiliac Joint injection                                       | 3,000.00  |
| 5                              | PRM0005  | Ultrasound-Guided Lumbar Facet Joint injection                                     | 4,000.00  |
| 6                              | PRM0006  | Ultrasound-Guided intercostal nerve block                                          | 4,000.00  |
| 7                              | PRM0007  | Ultrasound-Guided Caudal epidural                                                  | 4,000.00  |
| 8                              | PRM0008  | Western Acupuncture Pain Management (one session)                                  | 350.00    |
| 9                              | PRM0009  | Dry needling for musculoskeletal trigger point                                     | 500.00    |
| 10                             | PRM0010  | Non-guided intramuscular, or enthesis injection                                    | 780.00    |
| 11                             | PRM0011  | Painful scar infiltration                                                          | 780.00    |
| 12                             | PRM0012  | Ultrasound guided enthesis injection                                               | 1,500.00  |
| 13                             | PRM0013  | Ultrasound guided tendon sheath injection                                          | 1,500.00  |
| 14                             | PRM0014  | Ultrasound guided intramuscular, trigger points injection (myofascial pain)        | 2,000.00  |
| 15                             | PRM0015  | Non Guided Peripheral Nerve Blocks                                                 | 780.00    |
| 16                             | PRM0016  | Ultraousound or nerve stimulator guided Peripheral Nerve Blocks                    | 2,000.00  |
| 17                             | PRM0017  | Ultraousound or nerve stimulator guided Nerve Neurolysis                           | 2,000.00  |
| 18                             | PRM0018  | Guanithidine Block (CRPS)                                                          | 1,500.00  |
| 19                             | PRM0019  | Ultrasound/EMG guided intramuscular Botulinum toxin for spsticity(ex.medication)   | 2,000.00  |
| 20                             | PRM0020  | Ultrasound/EMG guided intramuscular Botulinum toxin for dystonia(ex.medication)    | 2,000.00  |
| 21                             | PRM0021  | Botulinum toxin injection for chronic migraine (excluding medication)              | 3,000.00  |
| 22                             | PRM0022  | Botulinum toxin injection for myofascial pain (excluding medication)               | 2,000.00  |
| 23                             | PRM0023  | U/S - Musculoskeletal Examination                                                  | 350.00    |
| 24                             | PST0001  | Physiotherapy - Initial Assessment at (AAH) - 45 minutes                           | 350.00    |

Mustafa El-Ahmid (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital

| SR | CODE    | DESCRIPTION                                                             | PRICE (QAR) |
|----|---------|-------------------------------------------------------------------------|-------------|
| 25 | PST0002 | Physiotherapy - Regular Visit at (AAH) - 45 minutes                     | 300.00      |
| 26 | PST0003 | Physiotherapy - Regular Follow up in-house review at (AAH) - 30 minutes | 250.00      |
| 27 | PST0004 | Short orientation session - 15 minutes                                  | 150.00      |
| 28 | PST0005 | Physiotherapy Home Visit                                                | 300.00      |
| 29 | PST0017 | Hydrotherapy / Gym Session                                              | 200.00      |
| 30 | PST0018 | Pediatrics Rehabilitation                                               | 300.00      |

PLASTIC SURGERY

Packages

|   |          |                                            |           |
|---|----------|--------------------------------------------|-----------|
| 1 | PKG03001 | (PLS / 01 Day) Scar Correction             | 12,750.00 |
| 2 | PKG03002 | (PLS / 02 Days) Bilateral Breast Reduction | 35,550.00 |

PODIATRY

Clinical Services / Procedures

|    |         |                                                                  |          |
|----|---------|------------------------------------------------------------------|----------|
| 1  | POD0001 | Aspiration of Cyst                                               | 850.00   |
| 2  | POD0002 | Evacuate Subungual Hematoma                                      | 1,050.00 |
| 3  | POD0003 | Debride Skin: Partial Thickness                                  | 350.00   |
| 4  | POD0004 | Debride Skin: Full Thickness                                     | 600.00   |
| 5  | POD0005 | Debride Skin: Thru Sub-Q                                         | 600.00   |
| 6  | POD0006 | Debride Skin: Thru Tendon/Muscle                                 | 1,300.00 |
| 7  | POD0007 | Debride Nails: < 6                                               | 150.00   |
| 8  | POD0008 | Debride Nails: 6 or more                                         | 300.00   |
| 9  | POD0009 | Destruction Benign Lesion/Wart: 1 - 14                           | 700.00   |
| 10 | POD0010 | I&D Abscess (Cutaneous, Subcutaneous, Abscess, Cyst, Paronychia) | 1,200.00 |
| 11 | POD0011 | I&D Hematoma/Seroma Fluid                                        | 1,050.00 |
| 12 | POD0012 | Matrixectomy: Partial/Complete                                   | 1,500.00 |
| 13 | POD0013 | Nail Avulsion: Partial/Complete                                  | 650.00   |
| 14 | POD0014 | Nail Avulsion: Each Additional Nail Plate                        | 300.00   |
| 15 | POD0015 | Paring/Cutting Corn/Callous: 1 Only                              | 275.00   |
| 16 | POD0016 | Paring/Cutting Corn/Callous: 2 - 4                               | 350.00   |
| 17 | POD0017 | Paring/Cutting Corn/Callous: > 5                                 | 450.00   |
| 18 | POD0018 | Injection Plantar Fascia                                         | 400.00   |
| 19 | POD0019 | BK Cast                                                          | 650.00   |
| 20 | POD0020 | Orthotics: Custom Made                                           | 1,500.00 |
| 21 | POD0021 | Anodyne Therapy: One Individual 30" Session                      | 200.00   |
| 22 | POD0022 | Anodyne Therapy: Package 3-30" Sessions/Week x 4 Weeks           | 1,500.00 |
| 23 | POD0023 | ESWT Foot                                                        | 1,000.00 |
| 24 | POD0024 | Podiatherm                                                       | 3,500.00 |

PSYCHIATRY

Clinical Services / Procedures

|   |         |                                                                 |          |
|---|---------|-----------------------------------------------------------------|----------|
| 1 | PSY0001 | Depot Injection service charges ( Excluding price of medicine ) | 50.00    |
| 2 | PSY0002 | General Psychiatric Report                                      | 250.00   |
| 3 | PSY0003 | Psychiatric Medico Legal Report                                 | 2,500.00 |

PULMONOLOGY

Clinical Services / Procedures

|   |         |                                 |          |
|---|---------|---------------------------------|----------|
| 1 | PLM0001 | Full PFTs                       | 1,000.00 |
| 2 | PLM0002 | Spirometry and flow-volume loop | 350.00   |
| 3 | PLM0003 | Diffusing Capacity              | 250.00   |
| 4 | PLM0004 | Respiratory Muscle Pressure     | 125.00   |
| 5 | PLM0005 | Airway Challenge Test           | 700.00   |

Director of Finance

Al-Ahli Hospital

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المستشفى الأهلي  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

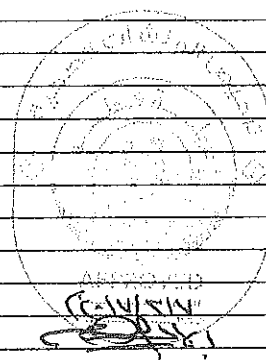
| SR | CODE     | DESCRIPTION                                             | PRICE (QAR) |
|----|----------|---------------------------------------------------------|-------------|
| 6  | PLM0006  | Spirometry pre/post with bronchodilators                | 400.00      |
| 7  | PLM0007  | Lung volumes by DLCO                                    | 350.00      |
| 8  | PLM0008  | Lung Volumes by body box (Pletysmography)               | 350.00      |
| 9  | PLM0009  | RAW (Airway Resistance)                                 | 125.00      |
| 10 | PLM0010  | MAP/MEP                                                 | 150.00      |
| 11 | PLM0011  | Arterial Blood Gases                                    | 60.00       |
| 12 | PLM0012  | Inhaler Usage Teaching                                  | 15.00       |
| 13 | PLM0013  | Oxygen Requirement Study                                | 250.00      |
| 14 | PLM0014  | Bronchoscopy with Lavage/Washer                         | 5,000.00    |
| 15 | PLM0015  | Bronchoscopy with Endo, Trans Bronch all                | 6,000.00    |
| 16 | PLM0016  | Bronchoscopy with TBNA                                  | 7,500.00    |
| 17 | PLM0017  | Thoracentesis with ultrasound                           | 1,000.00    |
| 18 | PLM0018  | Thoracentesis (without u/s)                             | 500.00      |
| 19 | PLM0019  | Central line placement C + S (CVP monitoring)           | 1,000.00    |
| 20 | PLM0020  | Swan gaze placement                                     | 2,000.00    |
| 21 | PLM0021  | Pulmonology consultation at ICU 1 hr                    | 1,000.00    |
| 22 | PLM0022  | Pulmonology follow-up at ICU 1 hr                       | 1,000.00    |
| 23 | PLM0023  | Pulmonology follow-up at ICU .5 hr                      | 600.00      |
| 24 | PLM0024  | Pulmonology follow-up at ICU .25 hr                     | 400.00      |
| 25 | PLM0025  | Facrional Exhaled Nitric Oxide Level (FE NO)            | 150.00      |
| 26 | PLM0030  | Sleep Study Diagnostic(Polygraphic)                     | 5,000.00    |
| 27 | PLM0031  | CPAP Titration                                          | 3,000.00    |
| 28 | PLM0032  | Split Study                                             | 6,000.00    |
| 29 | PLM0033  | ABG (Complete)                                          | 375.00      |
| 30 | PLM0034  | Arterial Blood Gases and Lactate                        | 350.00      |
| 31 | PLM0035  | Lactate                                                 | 80.00       |
| 32 | PLM0036  | HGB (Hemoglobin)                                        | 50.00       |
| 33 | PLM0037  | Ca++ (Calcium)                                          | 80.00       |
| 34 | PLM0038  | nBILI (Total Bilirubin)                                 | 60.00       |
| 35 | PLM0039  | Electrolytes (Sodium, Potassium, Calcium, Chloride)     | 85.00       |
| 36 | PLM0040  | Skin Allergy Prick Test                                 | 1,000.00    |
| 37 | PLM0041  | Sleep Diary                                             | 1,000.00    |
| 38 | PLM0042  | Sleep Study Diagnostic-24 hrs                           | 9,000.00    |
| 39 | PLM0043  | Sleep Study Diagnostic(Polygraphic) at Home             | 4,000.00    |
| 40 | PLM0044  | Actigarphy                                              | 1,500.00    |
| 41 | RES00001 | RES - Oxygen via nasal cannula - (1 hour)               | 40.00       |
| 42 | RES00002 | RES - Oxygen via nasal cannula - 1 Day (24 hours)       | 240.00      |
| 43 | RES00003 | RES - Oxygen via nasal cannula - 2 Days (48 hours)      | 390.00      |
| 44 | RES00004 | RES - Oxygen via nasal cannula - 3 Days (72 hours)      | 530.00      |
| 45 | RES00005 | RES - Oxygen via nasal cannula - 4 Days (96 hours)      | 680.00      |
| 46 | RES00006 | RES - Oxygen via nasal cannula - 5 Days (120 hours)     | 820.00      |
| 47 | RES00007 | RES - Oxygen via face mask - (1 hour)                   | 40.00       |
| 48 | RES00008 | RES - Oxygen via face mask - 1 Day (24 hours)           | 240.00      |
| 49 | RES00009 | RES - Oxygen via face mask - 2 Days (48 hours)          | 390.00      |
| 50 | RES00010 | RES - Oxygen via face mask - 3 Days (72 hours)          | 530.00      |
| 51 | RES00011 | RES - Oxygen via face mask - 4 Days (96 hours)          | 680.00      |
| 52 | RES00012 | RES - Oxygen via face mask - 5 Days (120 hours)         | 820.00      |
| 53 | RES00013 | RES - Mechanical Ventilation (ICU) - 1/2 Day (12 hours) | 600.00      |
| 54 | RES00014 | RES - Mechanical Ventilation (ICU) - 1 Day (24 hours)   | 1,200.00    |
| 55 | RES00015 | RES - Mechanical Ventilation (ICU) - 2 Days (48 hours)  | 1,920.00    |
| 56 | RES00016 | RES - Mechanical Ventilation (ICU)- 3 Days (72 hours)   | 2,640.00    |
| 57 | RES00017 | RES - Mechanical Ventilation (ICU)- 4 Days (96 hours)   | 3,360.00    |
| 58 | RES00018 | RES - Mechanical Ventilation (ICU)- 5 Days (120 hours)  | 4,080.00    |
| 59 | RES00019 | RES -BIPAP -1/2 Day (12 hours)                          | 450.00      |

Mustafa El-Ahwal (MBA, FCA, ACCA)

Director of Finance

Al-Ahli Hospital

| SR | CODE     | DESCRIPTION                           | PRICE (QAR) |
|----|----------|---------------------------------------|-------------|
| 60 | RES00020 | RES - BIPAP - 1 Day (24 hours)        | 750.00      |
| 61 | RES00021 | RES - BIPAP - 2 Days (48 hours)       | 1,200.00    |
| 62 | RES00022 | RES - BIPAP - 3 Days (72 hours)       | 1,650.00    |
| 63 | RES00023 | RES - BIPAP - 4 Days (96 hours)       | 2,100.00    |
| 64 | RES00024 | RES - BIPAP - 5 Days (120 hours)      | 2,550.00    |
| 65 | RES00025 | RES - Aerosol Cool (24 hours)         | 180.00      |
| 66 | RES00026 | RES - Aerosol Heated (24 hours)       | 180.00      |
| 67 | RES00027 | RES - RT Arterial blood gases         | 360.00      |
| 68 | RES00028 | Res - BIPAP Per Day                   | 750.00      |
| 69 | RES00029 | Res - CPT (Single Treatment)          | 60.00       |
| 70 | RES00030 | RES - Chest Physio Therapy (CPT) Q12  | 120.00      |
| 71 | RES00031 | RES - Chest Physio Therapy (CPT) Q4   | 360.00      |
| 72 | RES00032 | RES - Chest Physio Therapy (CPT) Q6   | 240.00      |
| 73 | RES00033 | RES - Chest Physio Therapy (CPT) Q8   | 180.00      |
| 74 | RES00034 | RES - Incentive Spirometry (Instruct) | 60.00       |
| 75 | RES00035 | RES - Nebulization (Single Treatment) | 60.00       |
| 76 | RES00036 | RES - Nebulization Q2 (For 24Hrs)     | 720.00      |
| 77 | RES00037 | RES - Nebulization Q3 (For 24Hrs)     | 480.00      |
| 78 | RES00038 | RES - Nebulization Q4 (For 24Hrs)     | 360.00      |
| 79 | RES00039 | RES - Nebulization Q8 (For 24Hrs)     | 180.00      |
| 80 | RES00040 | RES - Nebulization Q6 (For 24Hrs)     | 240.00      |
| 81 | RES00041 | RES - Peak Flow Test Pre/Post         | 50.00       |
| 82 | RES00042 | RES - Spontaneous Volume Test         | 60.00       |
| 83 | RES00043 | RES - Sputum Induction                | 60.00       |
| 84 | RES00044 | RES - Trache Care                     | 60.00       |
| 85 | RES00045 | RES - Trache Tube Change              | 60.00       |
| 86 | RES00046 | RES - Oxyhood (For 24Hrs)             | 100.00      |
| 87 | RES00047 | RES - Oxyhood (For 12Hrs)             | 50.00       |
| 88 | RES00048 | RES - Rsv Sputum Sampling             | 60.00       |
| 89 | RES00049 | RES - Cord Blood PH                   | 360.00      |
| 90 | SRV0051  | Nebulizer- Single treatment           | 75.00       |
| 91 | SRV0070  | Respiratory chest therapy             | 70.00       |
| 92 | SRV0123  | 6 Minutes Walk Test                   | 1,500.00    |
| 93 | SRV0124  | Guest Transportation Outside Doha     | 600.00      |
| 94 | SRV0125  | Guest Transportation within Doha      | 400.00      |



| RADIOLOGY     |          |                                                          |          |
|---------------|----------|----------------------------------------------------------|----------|
| INVESTIGATION |          |                                                          |          |
| 1             | CTS00001 | Radiology - CT Abd+Pelvis - (Without Contrast)           | 1,500.00 |
| 2             | CTS00002 | Radiology - CT Abd+Pelvis - (With Contrast)              | 1,900.00 |
| 3             | CTS00003 | Radiology - CT Abdomen Biopsy                            | 2,000.00 |
| 4             | CTS00004 | Radiology - CT Abscess Drainage                          | 2,000.00 |
| 5             | CTS00005 | Radiology - CT Angiogram Abdominal                       | 1,750.00 |
| 6             | CTS00006 | Radiology - CT Angiogram Pulmonary                       | 1,750.00 |
| 7             | CTS00007 | Radiology - CT Aortogram Thoracic                        | 1,750.00 |
| 8             | CTS00008 | Radiology - CT Ankle (one)                               | 1,000.00 |
| 9             | CTS00010 | Radiology - CT Ankle R+L                                 | 1,200.00 |
| 10            | CTS00011 | Radiology - CT Bone Biopsy                               | 2,300.00 |
| 11            | CTS00012 | Radiology - CT Bone Densitometry                         | 1,000.00 |
| 12            | CTS00013 | Radiology - CT Brain - (With Contrast)                   | 1,300.00 |
| 13            | CTS00014 | Radiology - CT Brain - (Without Contrast)                | 1,100.00 |
| 14            | CTS00015 | Radiology - CT Brain +Orbit - (With Contrast)            | 1,500.00 |
| 15            | CTS00016 | Radiology - CT Brain + Petrous Bone - (Without Contrast) | 1,300.00 |

Mustafa El-Ahwal (MD, FRCR, MRCP)  
Director of Finance  
Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                           | PRICE (QAR) |
|----|----------|-------------------------------------------------------|-------------|
| 16 | CTS00017 | Radiology - CT Brain + Sinuses - (Without Contrast)   | 1,300.00    |
| 17 | CTS00018 | Radiology - CT Cervical Spine                         | 1,300.00    |
| 18 | CTS00019 | Radiology - CT Chest                                  | 1,300.00    |
| 19 | CTS00020 | Radiology - CT Chest + (With Contrast)                | 1,500.00    |
| 20 | CTS00022 | Radiology - CT Dental                                 | 1,200.00    |
| 21 | CTS00023 | Radiology - CT Elbowwith (one)                        | 1,000.00    |
| 22 | CTS00025 | Radiology - CT Elbowwith R+L                          | 1,200.00    |
| 23 | CTS00026 | Radiology - CT Facial Bones - (Without Contrast)      | 1,100.00    |
| 24 | CTS00027 | Radiology - CT Facial Bones - (With Contrast)         | 1,400.00    |
| 25 | CTS00028 | Radiology - CT Femur (one)                            | 1,250.00    |
| 26 | CTS00030 | Radiology - CT Femur R+L                              | 1,500.00    |
| 27 | CTS00031 | Radiology - CT Foot (one)                             | 1,050.00    |
| 28 | CTS00033 | Radiology - CT Foot R+L                               | 1,200.00    |
| 29 | CTS00034 | Radiology - CT Hand (one)                             | 1,000.00    |
| 30 | CTS00036 | Radiology - CT Hand R+L                               | 1,200.00    |
| 31 | CTS00037 | Radiology - CT Hip (one)                              | 1,000.00    |
| 32 | CTS00039 | Radiology - CT Hip R+L                                | 1,400.00    |
| 33 | CTS00040 | Radiology - CT IAM/Mastoids                           | 1,200.00    |
| 34 | CTS00041 | Radiology - CT Knee (one)                             | 1,000.00    |
| 35 | CTS00043 | Radiology - CT Knee R+L                               | 1,400.00    |
| 36 | CTS00044 | Radiology - CT Leg Length Scanogram                   | 900.00      |
| 37 | CTS00045 | Radiology - CT Liver Tri-Phasic                       | 1,600.00    |
| 38 | CTS00046 | Radiology - CT Lumbar Spine                           | 1,500.00    |
| 39 | CTS00047 | Radiology - CT Lung Biopsy                            | 2,000.00    |
| 40 | CTS00048 | Radiology - CT Neck - (Without Contrast)              | 1,300.00    |
| 41 | CTS00049 | Radiology - CT Neck - (With Contrast)                 | 1,550.00    |
| 42 | CTS00050 | Radiology - CT Orbits - (Without Contrast)            | 1,200.00    |
| 43 | CTS00051 | Radiology - CT Orbits - (With Contrast)               | 1,500.00    |
| 44 | CTS00052 | Radiology - CT Pelvis - (Without Contrast)            | 1,200.00    |
| 45 | CTS00053 | Radiology - CT Pelvis - (With Contrast)               | 1,500.00    |
| 46 | CTS00054 | Radiology - CT Shoulder                               | 1,000.00    |
| 47 | CTS00055 | Radiology - CT Sinuses - (Without Contrast)           | 1,000.00    |
| 48 | CTS00056 | Radiology - CT Sinuses - (With Contrast)              | 1,200.00    |
| 49 | CTS00057 | Radiology - CT Thoracic Spine                         | 1,300.00    |
| 50 | CTS00058 | Radiology - CT TibFib (one)                           | 1,150.00    |
| 51 | CTS00060 | Radiology - CT TibFib R+L                             | 1,500.00    |
| 52 | CTS00061 | Radiology - CT Trauma (one part without contrast)     | 1,300.00    |
| 53 | CTS00062 | Radiology - CT Trauma (one part + contrast)           | 1,550.00    |
| 54 | CTS00063 | Radiology - CT Trauma (Chest, Abd., Pelvis+Contrast)  | 2,550.00    |
| 55 | CTS00064 | Radiology - CT Virtual Bronchoscopy                   | 2,000.00    |
| 56 | CTS00065 | Radiology - CT Virtual Colonoscopy                    | 2,000.00    |
| 57 | CTS00066 | Radiology - CT wrist (one)                            | 1,150.00    |
| 58 | CTS00068 | Radiology - CT wrists (R+L)                           | 1,500.00    |
| 59 | CTS00071 | Radiology - CT whole spine - (With Contrast)          | 2,550.00    |
| 60 | CTS00072 | Radiology - CT Cardiac                                | 3,450.00    |
| 61 | CTS00073 | Radiology - CT Abdomen Triple Contrast                | 2,000.00    |
| 62 | CTS00074 | Radiology - CT Peripheral Angiography for upper limbs | 1,500.00    |
| 63 | CTS00075 | Radiology - CT Peripheral Angiography for lower limbs | 2,000.00    |
| 64 | CTS00076 | Radiology - CT Peripheral Angiography for neck        | 1,500.00    |
| 65 | CTS00077 | Radiology - Imaging Contrast                          | 400.00      |
| 66 | CTS00078 | Radiology - CT Calcium Score                          | 1,800.00    |
| 67 | CTS00079 | Radiology - CT Contrast                               | 400.00      |
| 68 | FLU00001 | Radiology - FL Arthrogram                             | 550.00      |
| 69 | FLU00002 | Radiology - FL Ba Enema                               | 800.00      |

Director of Finance  
Al-Ahli Hospital



الاستشفاء الأهلي  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                 | PRICE (QAR) |
|-----|----------|-----------------------------------------------------------------------------|-------------|
| 70  | FLU00003 | Radiology - FL Ba Meal                                                      | 600.00      |
| 71  | FLU00004 | Radiology - FL Ba Meal+Follow THROU.                                        | 800.00      |
| 72  | FLU00005 | Radiology - FL Bone Biopsy                                                  | 1,000.00    |
| 73  | FLU00006 | Radiology - FL Retrograde urethrogram                                       | 600.00      |
| 74  | FLU00007 | Radiology - FL Fistulogram                                                  | 700.00      |
| 75  | FLU00008 | Radiology - FL Hystero                                                      | 650.00      |
| 76  | FLU00009 | Radiology - FL I.V.P.                                                       | 700.00      |
| 77  | FLU00010 | Radiology - FL Joint Inj/Asp                                                | 550.00      |
| 78  | FLU00011 | Radiology - FL Myelogram                                                    | 750.00      |
| 79  | FLU00012 | Radiology - FL Nephrosto (one)                                              | 1,300.00    |
| 80  | FLU00014 | Radiology - FL Nephrost R+L                                                 | 2,300.00    |
| 81  | FLU00015 | Radiology - FL Nerve Block                                                  | 635.00      |
| 82  | FLU00016 | Radiology - FL Retrograde urethrogram                                       | 600.00      |
| 83  | FLU00018 | Radiology - FL SialPar                                                      | 700.00      |
| 84  | FLU00020 | Radiology - FL SialPar R+L                                                  | 900.00      |
| 85  | FLU00021 | Radiology - FL SialSuMan (one)                                              | 700.00      |
| 86  | FLU00023 | Radiology - FL SialSbMaR+L                                                  | 1,000.00    |
| 87  | FLU00024 | Radiology - FL Sinogram                                                     | 700.00      |
| 88  | FLU00026 | Radiology - FL T-Tube Chole                                                 | 600.00      |
| 89  | FLU00027 | Radiology - FL Venogram (one leg)                                           | 600.00      |
| 90  | FLU00028 | Radiology - FL V.C.U.G.                                                     | 700.00      |
| 91  | FLU00029 | Radiology - FL Gastrograffin                                                | 800.00      |
| 92  | FLU00031 | Radiology - FL Per Operative Digital X-Ray/Fluroscopic Continuous Screening | 1,500.00    |
| 93  | GEN00001 | Radiology - Abdomen 2V                                                      | 250.00      |
| 94  | GEN00002 | Radiology - Abdomen                                                         | 150.00      |
| 95  | GEN00003 | Radiology - A-C Joint (one)                                                 | 200.00      |
| 96  | GEN00005 | Radiology - A-C Joint R+L                                                   | 250.00      |
| 97  | GEN00006 | Radiology - Ankle (one)                                                     | 150.00      |
| 98  | GEN00008 | Radiology - Ankle R+L                                                       | 200.00      |
| 99  | GEN00009 | Radiology - Bone Age                                                        | 150.00      |
| 100 | GEN00010 | Radiology - C Spine                                                         | 200.00      |
| 101 | GEN00011 | Radiology - C Spine+Obli                                                    | 350.00      |
| 102 | GEN00012 | Radiology - Chest 2V                                                        | 250.00      |
| 103 | GEN00013 | Radiology - Chest 1 view                                                    | 150.00      |
| 104 | GEN00014 | Radiology - Clavicle (one)                                                  | 200.00      |
| 105 | GEN00016 | Radiology - Clavicle R+L                                                    | 300.00      |
| 106 | GEN00017 | Radiology - Elbow (one)                                                     | 150.00      |
| 107 | GEN00019 | Radiology - Elbow R+L                                                       | 250.00      |
| 108 | GEN00020 | Radiology - Facial Bones                                                    | 200.00      |
| 109 | GEN00021 | Radiology - Femur (one)                                                     | 200.00      |
| 110 | GEN00023 | Radiology - Femur R+L                                                       | 350.00      |
| 111 | GEN00024 | Radiology - Finger (one)                                                    | 150.00      |
| 112 | GEN00026 | Radiology - Foot (one)                                                      | 150.00      |
| 113 | GEN00027 | Radiology - Foot Right                                                      | 150.00      |
| 114 | GEN00028 | Radiology - Foot R+L                                                        | 250.00      |
| 115 | GEN00029 | Radiology - Feet Stding                                                     | 250.00      |
| 116 | GEN00030 | Radiology - Forearm (one)                                                   | 150.00      |
| 117 | GEN00032 | Radiology - Forearm R+L                                                     | 250.00      |
| 118 | GEN00033 | Radiology - Hand (one)                                                      | 150.00      |
| 119 | GEN00035 | Radiology - Hand R+L                                                        | 250.00      |
| 120 | GEN00036 | Radiology - Heel (one)                                                      | 150.00      |
| 121 | GEN00038 | Radiology - Heel R+L                                                        | 250.00      |
| 122 | GEN00039 | Radiology - Humerus (one)                                                   | 150.00      |
| 123 | GEN00041 | Radiology - Humerus R+L                                                     | 250.00      |

Director of Finance

Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                    | PRICE (QAR) |
|-----|----------|--------------------------------------------------------------------------------|-------------|
| 124 | GEN00042 | Radiology - Knee (one)                                                         | 150.00      |
| 125 | GEN00044 | Radiology - Knee R+L                                                           | 250.00      |
| 126 | GEN00045 | Radiology - Notch View                                                         | 175.00      |
| 127 | GEN00046 | Radiology - Knees Stnding                                                      | 250.00      |
| 128 | GEN00047 | Radiology - L-S Spine                                                          | 250.00      |
| 129 | GEN00048 | Radiology - Lspine Obli                                                        | 350.00      |
| 130 | GEN00049 | Radiology - Mandible                                                           | 250.00      |
| 131 | GEN00050 | Radiology - Mastoids                                                           | 250.00      |
| 132 | GEN00051 | Radiology - Nasopharynx lateral                                                | 200.00      |
| 133 | GEN00052 | Radiology - NeckSoftTiss Ap lateral                                            | 200.00      |
| 134 | GEN00053 | Radiology - Nose                                                               | 200.00      |
| 135 | GEN00054 | Radiology - Orbits                                                             | 185.00      |
| 136 | GEN00055 | Radiology - Patella (one)                                                      | 200.00      |
| 137 | GEN00057 | Radiology - Pelvis                                                             | 150.00      |
| 138 | GEN00058 | Radiology - Pelvis + Hip (one)                                                 | 250.00      |
| 139 | GEN00060 | Radiology - Pituit Fossa                                                       | 175.00      |
| 140 | GEN00061 | Radiology - Ribs (one side)                                                    | 200.00      |
| 141 | GEN00063 | Radiology - Ribs R+L                                                           | 300.00      |
| 142 | GEN00064 | Radiology - S-I Joints                                                         | 300.00      |
| 143 | GEN00065 | Radiology - Sac+Cox                                                            | 200.00      |
| 144 | GEN00066 | Radiology - Scaphoid (one)                                                     | 150.00      |
| 145 | GEN00068 | Radiology - Scaphoid R+L                                                       | 250.00      |
| 146 | GEN00069 | Radiology - Scapula (one)                                                      | 150.00      |
| 147 | GEN00071 | Radiology - Scapula R+L                                                        | 250.00      |
| 148 | GEN00072 | Radiology - Scoliosis                                                          | 200.00      |
| 149 | GEN00073 | Radiology - Sinuses (one view)                                                 | 150.00      |
| 150 | GEN00074 | Radiology - Sinuses (Two view)                                                 | 250.00      |
| 151 | GEN00075 | Radiology - SkelSurvArthritis                                                  | 700.00      |
| 152 | GEN00076 | Radiology - SkelSurvAbuse                                                      | 700.00      |
| 153 | GEN00077 | Radiology - SkelSurvDysmorp                                                    | 700.00      |
| 154 | GEN00078 | Radiology - Skeletal Mets                                                      | 700.00      |
| 155 | GEN00079 | Radiology - Sternum                                                            | 250.00      |
| 156 | GEN00080 | Radiology - Shoulder (one)                                                     | 250.00      |
| 157 | GEN00082 | Radiology - Shoulder R+L                                                       | 400.00      |
| 158 | GEN00083 | Radiology - Skull                                                              | 200.00      |
| 159 | GEN00084 | Radiology - S-C Joints                                                         | 250.00      |
| 160 | GEN00085 | Radiology - Trauma Survey                                                      | 700.00      |
| 161 | GEN00086 | Radiology - T.M.Joints                                                         | 350.00      |
| 162 | GEN00087 | Radiology - Thoracic Inlet                                                     | 250.00      |
| 163 | GEN00088 | Radiology - T-Spine                                                            | 250.00      |
| 164 | GEN00089 | Radiology - Thumb (one)                                                        | 150.00      |
| 165 | GEN00091 | Radiology - Thumbs R+L                                                         | 250.00      |
| 166 | GEN00092 | Radiology - Tib Fib (one)                                                      | 200.00      |
| 167 | GEN00094 | Radiology - Tib Fib R+L                                                        | 350.00      |
| 168 | GEN00095 | Radiology - Toes (one)                                                         | 150.00      |
| 169 | GEN00097 | Radiology - Toes (bilateral)                                                   | 250.00      |
| 170 | GEN00098 | Radiology - wrist (one)                                                        | 150.00      |
| 171 | GEN00100 | Radiology - wrist R+L                                                          | 250.00      |
| 172 | GEN00101 | Radiology - Zygoma                                                             | 250.00      |
| 173 | GEN00201 | Radiology - Fracture X-Ray (any bone depend on Region Of Interest) ) two views | 250.00      |
| 174 | GEN00202 | Radiology - Plain abdomen (Two views)                                          | 250.00      |
| 175 | GEN00203 | Radiology - Skull lateral & waters view for sinuses and post nasal space       | 250.00      |
| 176 | GEN00205 | Radiology - Any one of the following views for the spine (two region)          | 300.00      |
| 177 | GEN00206 | One Hip Equipment AP. & LAT View (2 View)                                      | 250.00      |

Director of Finance

Al-Ahli Hospital

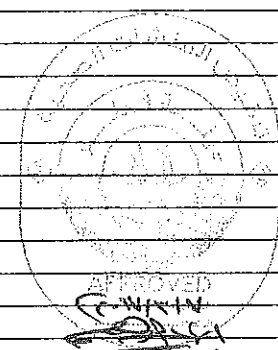


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AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                                        | PRICE (QAR) |
|-----|----------|----------------------------------------------------------------------------------------------------|-------------|
| 178 | GEN00207 | Lateral Hip Replacement AP & both Lateral (3 views)                                                | 400.00      |
| 179 | GEN00208 | Scoliosis-AP and Lateral Views                                                                     | 350.00      |
| 180 | GEN00209 | Hip X ray Left (AP AND LATERAL)                                                                    | 250.00      |
| 181 | GEN00210 | Hip X Ray Right (AP and LATERAL)                                                                   | 250.00      |
| 182 | GEN00211 | Pelvis and Both HIPS X ray                                                                         | 400.00      |
| 183 | GEN00212 | Radiology-Skeletal Survey for Scoliosis including all spine(Cervical, Thoracic, Lumbar and Sacral) | 700.00      |
| 184 | MAM00001 | Radiology - MM Breast (one)                                                                        | 400.00      |
| 185 | MAM00003 | Radiology - MM Breast R+L                                                                          | 600.00      |
| 186 | MAM00004 | Radiology - MM BxBreast (one)                                                                      | 1,000.00    |
| 187 | MAM00006 | Radiology - MM BxBreast B                                                                          | 1,300.00    |
| 188 | MAM00007 | Radiology - MM FNA Breast (one)                                                                    | 700.00      |
| 189 | MAM00009 | Radiology - MM FNA Bre R+L                                                                         | 1,300.00    |
| 190 | MAM00011 | Radiology - MM Stereo Bx (one)                                                                     | 1,300.00    |
| 191 | MAM00013 | Radiology - MM withire Loc (one)                                                                   | 1,000.00    |
| 192 | MAM00015 | Radiology - MM withire Loc R+L                                                                     | 1,500.00    |
| 193 | MAM00016 | Radiology - MM Tomosynthesis Breast (Right)                                                        | 500.00      |
| 194 | MAM00017 | Radiology - MM Tomosynthesis Breast (Left)                                                         | 500.00      |
| 195 | MAM00018 | Stereotactic (Mammogram guided) Breast True-cut Biopsy                                             | 2,000.00    |
| 196 | MIS00001 | Radiology - Isolation Technique                                                                    | 175.00      |
| 197 | MIS00002 | Radiology - Mobile Charge                                                                          | 150.00      |
| 198 | MIS00003 | Radiology - CD + Films / Extra Copy                                                                | 200.00      |
| 199 | MIS00004 | Radiology - Revised Rpt for CT Scan done outside the Hospital                                      | 200.00      |
| 200 | MIS00005 | Radiology - Revised Rpt for MRI done outside the Hospital                                          | 300.00      |
| 201 | MIS00006 | Radiology - Printing CD-MRI/CT (After 48 hours)/Extra Copy per Test                                | 50.00       |
| 202 | MIS00007 | Radiology - Film Copy X-ray/Mammography /Extra Copy per Test                                       | 50.00       |
| 203 | MIS00008 | Radiology - Film Copy MRI/CT /Extra Copy per Test                                                  | 100.00      |
| 204 | MRI00001 | Radiology - MRI Abdomen                                                                            | 2,000.00    |
| 205 | MRI00002 | Radiology - MRI Abdominal Angiogram                                                                | 1,500.00    |
| 206 | MRI00003 | Radiology - MRI Abdomen + Pelvis                                                                   | 2,500.00    |
| 207 | MRI00006 | Radiology - MRI Ankle R+L                                                                          | 2,500.00    |
| 208 | MRI00007 | Radiology - MRI Brain                                                                              | 1,500.00    |
| 209 | MRI00008 | Radiology - MRI Cardiac                                                                            | 3,000.00    |
| 210 | MRI00009 | Radiology - MRI Carotid Angiogram                                                                  | 1,500.00    |
| 211 | MRI00010 | Radiology - MRI Cervical Spine                                                                     | 1,500.00    |
| 212 | MRI00011 | Radiology - MRI Chest                                                                              | 2,000.00    |
| 213 | MRI00012 | Radiology - MRI Contrast                                                                           | 400.00      |
| 214 | MRI00015 | Radiology - MRI Elbow R+L                                                                          | 2,500.00    |
| 215 | MRI00018 | Radiology - MRI Foot R+L                                                                           | 2,500.00    |
| 216 | MRI00021 | Radiology - MRI Hand R+L                                                                           | 2,500.00    |
| 217 | MRI00024 | Radiology - MRI Hip R+L                                                                            | 2,500.00    |
| 218 | MRI00027 | Radiology - MRI Knee R+L                                                                           | 2,500.00    |
| 219 | MRI00028 | Radiology - MRI Lumbar Spine                                                                       | 1,500.00    |
| 220 | MRI00029 | Radiology - MRI Middle Ear                                                                         | 1,500.00    |
| 221 | MRI00030 | Radiology - MRI MRCP                                                                               | 1,500.00    |
| 222 | MRI00031 | Radiology - MRI Neck / Contrast                                                                    | 2,000.00    |
| 223 | MRI00032 | Radiology - MRI Orbits / Contrast                                                                  | 2,000.00    |
| 224 | MRI00033 | Radiology - MRI Pelvis                                                                             | 1,500.00    |
| 225 | MRI00034 | Radiology - MRI Pituitary Incl. Contrast                                                           | 2,000.00    |
| 226 | MRI00037 | Radiology - MRI Shoulder R+L                                                                       | 2,500.00    |
| 227 | MRI00038 | Radiology - MRI Sinuses                                                                            | 1,500.00    |
| 228 | MRI00039 | Radiology - MRI Thoracic Spine                                                                     | 1,500.00    |
| 229 | MRI00042 | Radiology - MRI Tib Fib R+L                                                                        | 2,500.00    |
| 230 | MRI00043 | Radiology - MRI TMJs                                                                               | 1,500.00    |
| 231 | MRI00044 | Radiology - MRI withhole Spine (3 studies)                                                         | 3,000.00    |



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AL-AHLI HOSPITAL  
Finance Department

Director of Finance  
Al-Ahli Hospital



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AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                             | PRICE (QAR) |
|-----|----------|---------------------------------------------------------|-------------|
| 232 | MRI00047 | Radiology - MRI wrist R+L                               | 2,500.00    |
| 233 | MRI00050 | Radiology - MRI Cervical Spine + Lumbar or Dorsal Spine | 2,500.00    |
| 234 | MRI00052 | Radiology - MRI TWO regions MRI                         | 2,500.00    |
| 235 | MRI00053 | Radiology - MRI Breast with contrast                    | 2,500.00    |
| 236 | MRI00054 | Friday Examination - MRI                                | 300.00      |
| 237 | MRI00055 | Radiology - MRI Ankle (Right)                           | 1,500.00    |
| 238 | MRI00056 | Radiology - MRI Ankle (Left)                            | 1,500.00    |
| 239 | MRI00057 | Radiology - MRI Elbow (Right)                           | 1,500.00    |
| 240 | MRI00058 | Radiology - MRI Elbow (Left)                            | 1,500.00    |
| 241 | MRI00059 | Radiology - MRI Foot (Right)                            | 1,500.00    |
| 242 | MRI00060 | Radiology - MRI Foot (Left)                             | 1,500.00    |
| 243 | MRI00061 | Radiology - MRI Hand (Right)                            | 1,500.00    |
| 244 | MRI00062 | Radiology - MRI Hand (Left)                             | 1,500.00    |
| 245 | MRI00063 | Radiology - MRI Hip (Right)                             | 1,500.00    |
| 246 | MRI00064 | Radiology - MRI Hip (Left)                              | 1,500.00    |
| 247 | MRI00065 | Radiology - MRI Knee (Right)                            | 1,500.00    |
| 248 | MRI00066 | Radiology - MRI Knee (Left)                             | 1,500.00    |
| 249 | MRI00067 | Radiology - MRI Shoulder (Right)                        | 1,500.00    |
| 250 | MRI00068 | Radiology - MRI Shoulder (Left)                         | 1,500.00    |
| 251 | MRI00069 | Radiology - MRI Tib Fib (Right)                         | 1,500.00    |
| 252 | MRI00070 | Radiology - MRI Tib Fib (Left)                          | 1,500.00    |
| 253 | MRI00071 | Radiology - MRI wrist (Right)                           | 1,500.00    |
| 254 | MRI00072 | Radiology - MRI wrist (Left)                            | 1,500.00    |
| 255 | MRI00073 | Radiology - MRI Thigh (Right)                           | 1,800.00    |
| 256 | MRI00074 | Radiology - MRI Thigh (Left)                            | 1,800.00    |
| 257 | MRI00075 | Radiology - MRI Humerus-upper Arm (Right)               | 1,800.00    |
| 258 | MRI00076 | Radiology - MRI Humerus-upper Arm (Left)                | 1,800.00    |
| 259 | MRI00077 | Radiology - MRI Forearm (Right)                         | 1,800.00    |
| 260 | MRI00078 | Radiology - MRI Forearm (Left)                          | 1,800.00    |
| 261 | MRI00079 | Radiology - MRI Thoracic Aortogram                      | 2,500.00    |
| 262 | MRI00080 | Radiology - MRI Abdominal Aortogram                     | 2,500.00    |
| 263 | MRI00081 | Radiology - MRI Peripheral Angiogram upper limbs        | 2,500.00    |
| 264 | MRI00082 | Radiology - MRI Peripheral Angiogram lower limbs        | 2,500.00    |
| 265 | MRI00083 | Radiology - MRI Brain +MRV                              | 2,000.00    |
| 266 | MRI00084 | Radiology - MRI Brain +MRA                              | 2,000.00    |
| 267 | MRI00085 | Radiology - MRI-MRU + Contrast                          | 2,000.00    |
| 268 | MRI00086 | Radiology - MRI SI Joint (Right)                        | 1,500.00    |
| 269 | MRI00087 | Radiology - MRI SI Joint (Left)                         | 1,500.00    |
| 270 | MRI00088 | Radiology - Sacrum and Coccyx                           | 1,500.00    |
| 271 | MRI00089 | Radiology - MRI Inner Ear + Contrast                    | 2,000.00    |
| 272 | MRI00090 | MRI Guided True Cut Breast Biopsy                       | 5,000.00    |
| 273 | OPR00003 | Radiology - Operative Cholangiogram                     | 500.00      |
| 274 | USS00001 | Radiology - U/S Abdomen                                 | 500.00      |
| 275 | USS00002 | Radiology - U/S Abdominal Aorta                         | 500.00      |
| 276 | USS00003 | Radiology - U/S Arm Vascular (one)                      | 700.00      |
| 277 | USS00005 | Radiology - U/S Arm Vascular R+L                        | 800.00      |
| 278 | USS00006 | Radiology - U/S Guided Biopsy                           | 1,000.00    |
| 279 | USS00009 | Radiology - U/S Breast R+L                              | 700.00      |
| 280 | USS00010 | Radiology - U/S Carotid Doppler                         | 700.00      |
| 281 | USS00011 | Radiology - U/S Drainage Abscess/Fluid                  | 1,000.00    |
| 282 | USS00012 | Radiology - U/S Foreign Body Localisation               | 700.00      |
| 283 | USS00013 | Radiology - U/S Hip (one)                               | 500.00      |
| 284 | USS00015 | Radiology - U/S Hip R+L                                 | 800.00      |
| 285 | USS00016 | Radiology - U/S Leg Vascular (one)                      | 800.00      |

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AL-AHLI HOSPITAL  
PRICE LIST

Date: 12-Feb-17

| SR  | CODE       | DESCRIPTION                                             | PRICE (QAR) |
|-----|------------|---------------------------------------------------------|-------------|
| 286 | USS00018   | Radiology - U/S Leg Vascular R+L                        | 1,500.00    |
| 287 | USS00019   | Radiology - U/S Neonatal Head                           | 600.00      |
| 288 | USS00020   | Radiology - U/S Neonatal Hips                           | 800.00      |
| 289 | USS00021   | Radiology - U/S Obstetric                               | 500.00      |
| 290 | USS00021-A | Radiology - U/S Ultrasound Obstetrics (Early Pregnancy) | 500.00      |
| 291 | USS00021-B | Radiology - U/S Ultrasound Obstetrics (After 12 weeks)  | 700.00      |
| 292 | USS00022   | Radiology - U/S Obstetric+Cordflow                      | 700.00      |
| 293 | USS00023   | Radiology - U/S Obstetric+Physical Profile              | 800.00      |
| 294 | USS00024   | Radiology - U/S Orbit                                   | 500.00      |
| 295 | USS00025   | Radiology - U/S Ovulation X4 Appts                      | 800.00      |
| 296 | USS00026   | Radiology - U/S Pelvis                                  | 500.00      |
| 297 | USS00027   | Radiology - U/S Penis Doppler                           | 1,250.00    |
| 298 | USS00028   | Radiology - U/S Prostate                                | 500.00      |
| 299 | USS00031   | Radiology - U/S Renal Doppler R+L                       | 1,000.00    |
| 300 | USS00032   | Radiology - U/S Salivary Gland                          | 500.00      |
| 301 | USS00033   | Radiology - U/S Scrotum Doppler                         | 500.00      |
| 302 | USS00034   | Radiology - U/S Shoulder Left                           | 500.00      |
| 303 | USS00036   | Radiology - U/S Shoulder R+L                            | 750.00      |
| 304 | USS00037   | Radiology - U/S Soft Tissue                             | 500.00      |
| 305 | USS00038   | Radiology - U/S Thyroid                                 | 500.00      |
| 306 | USS00039   | Radiology - U/S Twithins                                | 800.00      |
| 307 | USS00040   | Radiology - U/S Pelvis - IUCD                           | 500.00      |
| 308 | USS00041   | Radiology - U/S Carotid Doppler- Both Side              | 1,200.00    |
| 309 | USS00042   | Radiology - U/S 4 D                                     | 200.00      |
| 310 | USS00044   | Friday Examination - U/S(Extra Charge)                  | 300.00      |
| 311 | USS00045   | U/S Renal System                                        | 500.00      |
| 312 | USS00046   | Vacuum Assisted Mammogram Biopsy                        | 6,000.00    |
| 313 | USS00047   | Vacuum assisted Ultrasound guided biopsy                | 6,000.00    |
| 314 | USS0043    | US Liver and Doppler for Portal and Hepatic Artery      | 1,200.00    |

RHEUMATOLOGY

Clinical Services / Procedures

|   |         |                                                                          |          |
|---|---------|--------------------------------------------------------------------------|----------|
| 1 | RHE0001 | Aspiration/injection; major joint/bursa (w/out medication)               | 650.00   |
| 2 | RHE0002 | Aspiration/injection; small joint/bursa (w/out medication)               | 400.00   |
| 3 | RHE0003 | DXA scan -Dual energy x-ray absorptiometry, bone density study, 1+ sites | 1,200.00 |

SPEECH THERAPY

Clinical Services / Procedures

|    |         |                                                |           |
|----|---------|------------------------------------------------|-----------|
| 1  | SPH0001 | Speech Therapy Session - 30 mins               | 350.00    |
| 2  | SPH0002 | Speech Therapy Package - 3 months @ 1 a week   | 3,600.00  |
| 3  | SPH0003 | Speech Therapy Package - 6 months @ 1 a week   | 7,200.00  |
| 4  | SPH0004 | Speech Therapy Package - 12 months @ 1 a week  | 14,400.00 |
| 5  | SPH0005 | Speech Therapy Package - 3 months @ 2x a week  | 7,200.00  |
| 6  | SPH0006 | Speech Therapy Package - 6 months @ 2x a week  | 14,400.00 |
| 7  | SPH0007 | Speech Therapy Package - 12 months @ 2x a week | 28,800.00 |
| 8  | SPH0008 | Speech Therapy Package - 3 months @ 3x a week  | 10,800.00 |
| 9  | SPH0009 | Speech Therapy Package - 6 months @ 3x a week  | 21,600.00 |
| 10 | SPH0010 | Speech Therapy Package - 12 months @ 3x a week | 43,200.00 |

SURGERY

Finance Department

Packages

|   |          |                                                          |          |
|---|----------|----------------------------------------------------------|----------|
| 1 | PKG08001 | (SRG / Sub-Op) Removal of Implant under Local Anesthesia | 1,700.00 |
| 2 | PKG08002 | (SRG / (D Case) Biopsy of lesion of lip                  | 1,675.00 |

Director of Finance  
Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

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Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                                                   | PRICE (QAR) |
|----|----------|-------------------------------------------------------------------------------|-------------|
| 3  | PKG08003 | (SRG / D Case) Aspiration of subcutaneous haematoma L.A.                      | 1,450.00    |
| 4  | PKG08004 | (SRG / D Case) Percutaneous biopsy of lesion of breast                        | 1,825.00    |
| 5  | PKG08005 | (SRG / D Case) Wedge excision or avulsion of nail incl.chem.ablation nail bed | 1,825.00    |
| 6  | PKG08006 | (SRG / D Case) Ingrowing Toe nail removal w/ wedge resection under G.A.       | 2,525.00    |
| 7  | PKG08007 | (SRG / D Case) I & D of small abscess G.A.                                    | 4,912.50    |
| 8  | PKG08008 | (SRG / D Case) I & D of medium abscess G.A.                                   | 4,912.50    |
| 9  | PKG08009 | (SRG / D Case) I & D of large abscess G.A.                                    | 4,912.50    |
| 10 | PKG08010 | (SRG / 02-Days) Excision of Carbuncle under GA                                | 7,250.00    |
| 11 | PKG08011 | (SRG / 01-Day) Debridement of wound under GA                                  | 5,800.00    |
| 12 | PKG08012 | (SRG / D Case) Secondary suture of skin under GA                              | 4,912.50    |
| 13 | PKG08013 | (SRG / D Case) Suturing of wounds - GA                                        | 4,412.50    |
| 14 | PKG08014 | (SRG / D Case) Suture of lip under GA                                         | 4,912.50    |
| 15 | PKG08015 | (SRG / D Case) Suturing of tongue under GA                                    | 4,912.50    |
| 16 | PKG08016 | (SRG / D Case) Suture of mouth under GA                                       | 4,912.50    |
| 17 | PKG08017 | (SRG / D Case) Evacuation of haematoma under GA                               | 4,912.50    |
| 18 | PKG08018 | (SRG / D Case) Oral cavity lesion under LA (excision)                         | 2,550.00    |
| 19 | PKG08019 | (SRG / D Case) Oral cavity lesion under GA (excision)                         | 4,912.50    |
| 20 | PKG08020 | (SRG / D Case) Excision of Perianal skin tag under L.A.                       | 2,300.00    |
| 21 | PKG08021 | (SRG / D Case) Excision of Perianal skin tag under G.A.                       | 4,912.50    |
| 22 | PKG08022 | (SRG / D Case ) Anorectal stretch including E U A and                         | 3,775.00    |
| 23 | PKG08023 | (SRG / D Case) Banding of haemorrhoids/ Infrared Coagulation of haemorrhoids  | 2,775.00    |
| 24 | PKG08024 | (SRG / D Case) Removal of thrombosed pile (External)                          | 4,312.50    |
| 25 | PKG08025 | (SRG / 01-Day) Lateral sphincterotomy of anus                                 | 5,825.00    |
| 26 | PKG08026 | (SRG / 01-Day) Haemorrhoidectomy                                              | 7,112.50    |
| 27 | PKG08027 | (SRG / D Case) Non surgical treatment of Haemorrhoid Injection sclero.therapy | 2,100.00    |
| 28 | PKG08028 | (SRG / D Case) Anal dilatation                                                | 4,375.00    |
| 29 | PKG08029 | (SRG / 01-Day) Ischiorectal abscess I&D under GA                              | 5,262.50    |
| 30 | PKG08030 | (SRG / 01-Day) Perianal abscess I&D under GA                                  | 4,812.50    |
| 31 | PKG08031 | (SRG / 01-Day) Pilonidal abscess I&D under GA                                 | 5,262.50    |
| 32 | PKG08032 | (SRG / 01-Day) Pilonidal sinus                                                | 7,112.50    |
| 33 | PKG08033 | (SRG / 01-Day) Fistula - in - ano excision - low                              | 7,362.50    |
| 34 | PKG08034 | (SRG / 02-Days) Fistula - in - ano excision ? high                            | 11,100.00   |
| 35 | PKG08035 | (SRG / 01-Day) Fistula - in - ano excision - high (Second stage)              | 5,112.50    |
| 36 | PKG08036 | (SRG / 04-Days) Anal sphincter repair                                         | 15,000.00   |
| 37 | PKG08037 | (SRG / 01-Day) Bioglue injection of fistula - L.A.                            | 3,100.00    |
| 38 | PKG08038 | (SRG / 01-Day) Bioglue injection of fistula - G.A.                            | 5,512.50    |
| 39 | PKG08039 | (SRG / 03-Days) Imperforated Anus - Perineal Anoplasty                        | 13,300.00   |
| 40 | PKG08040 | (SRG / 05-Days) Imperforated Anus - Colostomy                                 | 14,700.00   |
| 41 | PKG08041 | (SRG / 08-Days) Imperforated Anus - Pull through abdomino-perineal            | 23,800.00   |
| 42 | PKG08042 | (SRG / D Case) Removal of FB (LA)                                             | 3,000.00    |
| 43 | PKG08043 | (SRG / D Case) Removal of FB (GA)                                             | 4,312.50    |
| 44 | PKG08044 | (SRG / D Case) Biopsy/sampling of axillary lymph nodes                        | 4,662.50    |
| 45 | PKG08045 | (SRG / D Case) Biopsy/sampling of cervical lymph nodes G.A.                   | 5,262.50    |
| 46 | PKG08046 | (SRG / D Case) Biopsy/sampling of inguinal lymph nodes                        | 5,262.50    |
| 47 | PKG08047 | (SRG / D Case) Excision of multiple or big lipoma                             | 4,950.00    |
| 48 | PKG08048 | (SRG / D Case) Excision of multiple neurofibroma                              | 5,450.00    |
| 49 | PKG08049 | (SRG / D Case) Excision of ganglion cysts                                     | 6,300.00    |
| 50 | PKG08050 | (SRG / D Case) Excision of small skin tumors GA                               | 4,912.50    |
| 51 | PKG08051 | (SRG / D Case) Sebaceous Cyst Under GA                                        | 4,312.50    |
| 52 | PKG08052 | (SRG / D Case) Excision of lipoma under GA                                    | 4,662.50    |
| 53 | PKG08053 | (SRG / 01-Day) Drainage of breast abscess                                     | 5,112.50    |
| 54 | PKG08054 | (SRG / 01-Day) Microdochotomy                                                 | 5,362.50    |
| 55 | PKG08055 | (SRG / 01-Day) Wide local excision of lesion of breast                        | 7,900.00    |
| 56 | PKG08056 | (SRG / 01-Day) Excision of simple tumor or chronic abscess of breast          | 6,862.50    |

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Al-Ahli Hospital



مستشفى الأهلي  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                  | PRICE (QAR) |
|-----|----------|------------------------------------------------------------------------------|-------------|
| 57  | PKG08057 | (SRG / 01-Day) Biopsy of breast + tumour excision                            | 7,362.50    |
| 58  | PKG08058 | (SRG / 01-Day) Mastectomy male (not gynecomastia)                            | 7,550.00    |
| 59  | PKG08059 | (SRG / 04-Days) Simple mastectomy + clearing of axillary lymph nodes         | 17,375.00   |
| 60  | PKG08060 | (SRG / 04-Days) Modified Radical Mastectomy w/axillary clearance             | 18,575.00   |
| 61  | PKG08061 | (SRG / 02-Days) Mammoplasty [One side]                                       | 11,050.00   |
| 62  | PKG08062 | (SRG / 02-Days) Mammoplasty [Two side]                                       | 15,475.00   |
| 63  | PKG08063 | (SRG / 02-Days) Simple Mastectomy                                            | 10,100.00   |
| 64  | PKG08064 | (SRG / 03-Days) Wide local excision + Axillary clearance                     | 15,375.00   |
| 65  | PKG08065 | (SRG / 03-Days) Split autograft of skin large site                           | 11,800.00   |
| 66  | PKG08066 | (SRG / 02-Days) Split autograft of skin-small site                           | 10,562.50   |
| 67  | PKG08067 | (SRG / D Case) Excision of skin lesion with rotation flap - small            | 5,762.50    |
| 68  | PKG08068 | (SRG / D Case) Excision of skin lesion with rotation flap - medium           | 6,150.00    |
| 69  | PKG08069 | (SRG / D Case) Excision of skin lesion with rotation flap - large            | 7,800.00    |
| 70  | PKG08070 | (SRG / 03-Days) Embolectomy for limb ischemia                                | 14,300.00   |
| 71  | PKG08071 | (SRG / 02-Days) Amputation of big Toe                                        | 8,462.50    |
| 72  | PKG08072 | (SRG / 03-Days) Mid tarsal amputation                                        | 10,200.00   |
| 73  | PKG08073 | (SRG / 03-Days) Below knee amputation                                        | 13,275.00   |
| 74  | PKG08074 | (SRG / 03-Days) Above knee amputation                                        | 13,525.00   |
| 75  | PKG08075 | (SRG / D Case) Circumcision under GA                                         | 3,825.00    |
| 76  | PKG08076 | (SRG / D Case) Re-circumcision 1 day under GA                                | 4,125.00    |
| 77  | PKG08077 | (SRG / 04-Days) Closure of Colostomy                                         | 10,625.00   |
| 78  | PKG08078 | (SRG / 05-Days) Closure of Colostomy w/ Anastmosis.                          | 14,925.00   |
| 79  | PKG08079 | (SRG / 04-Days) Ileostomy                                                    | 11,900.00   |
| 80  | PKG08080 | (SRG / 04-Days) Colostomy                                                    | 11,900.00   |
| 81  | PKG08081 | (SRG / 04-Days) Ileostomy Closure                                            | 12,650.00   |
| 82  | PKG08082 | (SRG / 01-Day) Hemi-thyroidectomy                                            | 13,575.00   |
| 83  | PKG08083 | (SRG / 02-Days) Subtotal thyroidectomy                                       | 15,925.00   |
| 84  | PKG08084 | (SRG / 02-Days) Total thyroidectomy and/or recurrent cases                   | 16,850.00   |
| 85  | PKG08085 | (SRG / 01-Day) Thyroglossal cyst                                             | 9,050.00    |
| 86  | PKG08086 | (SRG / 01-Day) Branchial cyst                                                | 10,150.00   |
| 87  | PKG08087 | (SRG / 01-Day) Excision of submandibular gland                               | 10,150.00   |
| 88  | PKG08088 | (SRG / 03-Days) Parotidectomy Superficial                                    | 18,300.00   |
| 89  | PKG08089 | (SRG / 03-Days) Parotidectomy total                                          | 18,000.00   |
| 90  | PKG08090 | (SRG / 04-Days) Block Neck lymph node dissection                             | 19,500.00   |
| 91  | PKG08091 | (SRG / 01-Day) Primary repair of inguinal hernia (open)                      | 11,150.00   |
| 92  | PKG08092 | (SRG / 01-Day) Primary repair of inguinal hernia-bilateral (Open)            | 12,625.00   |
| 93  | PKG08093 | (SRG / 01-Day) Bilateral Inguinal Hernia With Mech (Open)                    | 14,825.00   |
| 94  | PKG08094 | (SRG / 01-Day) Repair of recurrent inguinal hernia (Open)                    | 13,275.00   |
| 95  | PKG08095 | (SRG / 01-Day) Repair of recurrent inguinal hernia-bilateral (Open)          | 16,900.00   |
| 96  | PKG08096 | (SRG / 01-Day) Primary repair of inguinal hernia (Laparoscopic)              | 10,300.00   |
| 97  | PKG08097 | (SRG / 01-Day) Bilateral Inguinal Hernia Repair (Laparoscopic)               | 13,350.00   |
| 98  | PKG08098 | (SRG / 01-Day) Primary of recurrent inguinal hernia (Laparoscopic)           | 13,225.00   |
| 99  | PKG08099 | (SRG / 01-Day) Primary of recurrent inguinal hernia-bilateral (Laparoscopic) | 14,850.00   |
| 100 | PKG08100 | (SRG / 01-Day) Herniotomy                                                    | 7,400.00    |
| 101 | PKG08101 | (SRG / 01-Day) Herniotomy (Bilateral)                                        | 9,400.00    |
| 102 | PKG08102 | (SRG / 01-Day) Congenital umbilical hernia repair (no mesh) (pediatric)      | 7,050.00    |
| 103 | PKG08103 | (SRG / 01-Day) Para umbilical hernia repair (no mesh) open                   | 9,400.00    |
| 104 | PKG08104 | (SRG / 01-Day) Para umbilical hernia repair (with mesh) open                 | 10,150.00   |
| 105 | PKG08105 | (SRG / 01-Day) Para umbilical hernia repair - Laparoscopic                   | 11,650.00   |
| 106 | PKG08106 | (SRG / 05-Days) Repair of Paraumbilical hernia with diversion recti repair   | 16,700.00   |
| 107 | PKG08107 | (SRG / 05-Days) Repair of Paraumbilical hernia and excision of fat           | 16,825.00   |
| 108 | PKG08108 | (SRG / 05-Days) Abdominoplasty                                               | 27,775.00   |
| 109 | PKG08109 | (SRG / 02-Days) Primary repair of incisional hernia (open)                   | 10,900.00   |
| 110 | PKG08110 | (SRG / 02-Days) Primary repair of incisional hernia-medium-open              | 12,575.00   |

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Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                      | PRICE (QAR) |
|-----|----------|----------------------------------------------------------------------------------|-------------|
| 111 | PKG08111 | (SRG / 03-Days) Primary repair of incisional hernia-large-open                   | 16,800.00   |
| 112 | PKG08112 | (SRG / 02-Days) Incisional hernia (Laparoscopy)                                  | 16,600.00   |
| 113 | PKG08113 | (SRG / 01-Day) Primary repair of incisional hernia (Laparoscopic)                | 11,687.50   |
| 114 | PKG08114 | (SRG / 01-Day) Primary repair of incisional hernia (Laparoscopic)+Repair of vent | 13,875.00   |
| 115 | PKG08115 | (SRG / 01-Day) Repair of femoral hernia open - low approach                      | 6,200.00    |
| 116 | PKG08116 | (SRG / 02-Days) Primary repair of femoral hernia                                 | 8,400.00    |
| 117 | PKG08117 | (SRG / 02-Days) Strangulated hernia                                              | 12,325.00   |
| 118 | PKG08118 | (SRG / 02-Days) Primary repair of large inguinoscrotal hernia - open             | 14,175.00   |
| 119 | PKG08119 | (SRG / 02-Days) Primary repair of large inguinoscrotal hernia - laparoscopic     | 12,575.00   |
| 120 | PKG08120 | (SRG / 01-Day) Repair of other hernia of abdominal wall (Open)                   | 8,650.00    |
| 121 | PKG08121 | (SRG / 01-Day) Laparoscopic repair of hernia                                     | 10,400.00   |
| 122 | PKG08122 | (SRG / 02-Days) Dermolipectomy                                                   | 18,100.00   |
| 123 | PKG08123 | (SRG / 01-Day) Omphalectomy                                                      | 10,400.00   |
| 124 | PKG08124 | (SRG / 01-Day) Omphaloplasty                                                     | 10,400.00   |
| 125 | PKG08125 | (SRG / D Case) Vasectomy                                                         | 5,912.50    |
| 126 | PKG08126 | (SRG / D Case) Vasectomy - GA                                                    | 5,812.50    |
| 127 | PKG08127 | (SRG / D Case) Varicocelectomy / unilateral                                      | 7,200.00    |
| 128 | PKG08128 | (SRG / D Case) Varicocelectomy / bilateral                                       | 9,275.00    |
| 129 | PKG08129 | (SRG / 01-Day) Varicocelectomy/ Unilateral/ Laparoscopic                         | 10,400.00   |
| 130 | PKG08130 | (SRG / 01-Day) Varicocelectomy/ Bilateral/ Laparoscopic                          | 11,900.00   |
| 131 | PKG08131 | (SRG / D Case) Orchidectomy / unilateral                                         | 6,400.00    |
| 132 | PKG08132 | (SRG / D Case) Orchidectomy / bilateral                                          | 8,200.00    |
| 133 | PKG08133 | (SRG / D Case) Orichidopexy / unilateral                                         | 6,900.00    |
| 134 | PKG08134 | (SRG / D Case) Orichidopexy / bilateral                                          | 9,375.00    |
| 135 | PKG08135 | (SRG / 01-Day) Hydrocelectomy/ unilateral                                        | 6,762.50    |
| 136 | PKG08136 | (SRG / 01-Day) Hydrocelectomy/ bilateral                                         | 8,550.00    |
| 137 | PKG08137 | (SRG / 01-Day) Varicose veins high ligation & stripping - 1 limb                 | 8,525.00    |
| 138 | PKG08138 | (SRG / 01-Day) Varicose veins high ligation & stripping - 2 limbs                | 13,100.00   |
| 139 | PKG08139 | (SRG / 01-Day) Diagnostic Laparoscope                                            | 8,162.50    |
| 140 | PKG08140 | (SRG / 01-Day) Therapeutic Laparoscopy                                           | 10,200.00   |
| 141 | PKG08141 | (SRG / 02-Days) Drainage of abscess of appendix                                  | 8,112.50    |
| 142 | PKG08142 | (SRG / 02-Days) Appendectomy (open)                                              | 9,750.00    |
| 143 | PKG08143 | (SRG / 01-Day) Appendectomy (Laprosopic)                                         | 11,200.00   |
| 144 | PKG08144 | (SRG / 03-Days) Laparotomy without procedure                                     | 11,700.00   |
| 145 | PKG08145 | (SRG / 03-Days) Laparotomy Exploratory Reopening of recent Laparotomy            | 11,200.00   |
| 146 | PKG08146 | (SRG / 03-Days) Drainage of Subdiaphragmatic or Subphrenic Abscess               | 12,350.00   |
| 147 | PKG08147 | (SRG / 03-Days) Laparoscopic drainage of Intraabdominal abscess                  | 14,837.50   |
| 148 | PKG08148 | (SRG / 03-Days) Adhesiolysis (open)                                              | 13,275.00   |
| 149 | PKG08149 | (SRG / 03-Days) Lap. Adhesiolysis                                                | 14,525.00   |
| 150 | PKG08150 | (SRG / 03-Days) Cholecystectomy (open)                                           | 10,950.00   |
| 151 | PKG08151 | (SRG / 01-Day) Cholecystectomy (Laparoscopic)                                    | 13,950.00   |
| 152 | PKG08152 | (SRG / 02-Days) Cholecystostomy                                                  | 10,100.00   |
| 153 | PKG08153 | (SRG / 05-Days) Cholecystectomy with exploration of common bile duct             | 18,600.00   |
| 154 | PKG08154 | (SRG / 01-Day) Laparoscopic cholecystectomy + on table cholangiogram             | 12,837.50   |
| 155 | PKG08155 | (SRG / 05-Days) Lap. cholecy + on table cholangiogram + C.B.D. stone extraction  | 21,350.00   |
| 156 | PKG08156 | (SRG / 05-Days) Cholecystectomy + Choledochoduodenostomy (open)                  | 20,925.00   |
| 157 | PKG08157 | (SRG / 05-Days) Cholecystectomy + Choledochojunostomy (simple loop)              | 21,525.00   |
| 158 | PKG08158 | (SRG / 05-Days) Cholecystectomy + Choledochojunostomy (Roux-En-Y)                | 23,250.00   |
| 159 | PKG08159 | (SRG / 04-Days) Cholecystojejunostomy (simple loop)                              | 14,375.00   |
| 160 | PKG08160 | (SRG / 04-Days) Cholecystoentrostomy Roux - En-y                                 | 18,000.00   |
| 161 | PKG08161 | (SRG / 04-Days) Cholecystoentrostomy Rony + Gastroentrostomy                     | 21,400.00   |
| 162 | PKG08162 | (SRG / 05-Days) Bile duct repair - Hepaticojunostomy-(Roux-En-Y)                 | 25,350.00   |
| 163 | PKG08163 | (SRG / 05-Days) Bile duct repair - Hepaticojunostomy-(Roux-En-Y)-left duct app   | 26,600.00   |
| 164 | PKG08164 | (SRG / 07-Days) Pancreatectomy Distal Subtotal                                   | 28,200.00   |

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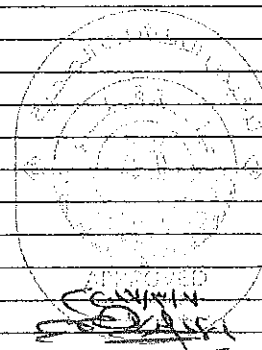


# AL-AHLI HOSPITAL PRICE LIST

المستشفى الأهلي  
AL-AHLI HOSPITAL

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                            | PRICE (QAR) |
|-----|----------|------------------------------------------------------------------------|-------------|
| 165 | PKG08165 | (SRG / 07-Days) Pancreatectomy w/ Pancreaticojunostomy                 | 29,400.00   |
| 166 | PKG08166 | (SRG / 10-Days) Whipple Procedure                                      | 39,150.00   |
| 167 | PKG08167 | (SRG / 05-Days) Pancreatic Cyst to GIT DRCT Int Anast Roux-En-y        | 19,200.00   |
| 168 | PKG08168 | (SRG / 05-Days) Pancreatic cyst cystogastrostomy-open                  | 15,575.00   |
| 169 | PKG08169 | (SRG / 05-Days) Pancreatic cyst cystogastrostomy-laparoscopic          | 16,175.00   |
| 170 | PKG08170 | (SRG / 05-Days) Drain liver abscess                                    | 14,500.00   |
| 171 | PKG08171 | (SRG / 05-Days) Drain liver abscess - laparoscopic                     | 15,750.00   |
| 172 | PKG08172 | (SRG / 05-Days) Hydatid cyst liver                                     | 19,200.00   |
| 173 | PKG08173 | (SRG / 03-Days) Liver Biopsy open laparotomy                           | 11,200.00   |
| 174 | PKG08174 | (SRG / 03-Days) Liver Biopsy - laparoscopic                            | 12,100.00   |
| 175 | PKG08175 | (SRG / 10-Days) Hepatectomy Liver resection partial lobectomy          | 31,100.00   |
| 176 | PKG08176 | (SRG / 10-Days) Hepatectomy Liver resection total left lobectomy       | 33,500.00   |
| 177 | PKG08177 | (SRG / 10-Days) Hepatectomy Liver resection total right lobectomy      | 39,150.00   |
| 178 | PKG08178 | (SRG / 07-Days) Hepatorrhaphy Suture of liver wound injury             | 22,250.00   |
| 179 | PKG08179 | (SRG / 05-Days) Excision of hepatic cyst                               | 16,175.00   |
| 180 | PKG08180 | (SRG / 03-Days) Excision of hepatic cyst (Laparoscopic)                | 13,775.00   |
| 181 | PKG08181 | (SRG / 04-Days) Splenectomy                                            | 13,725.00   |
| 182 | PKG08182 | (SRG / 01-Day) Splenectomy (Laparoscopic)                              | 11,375.00   |
| 183 | PKG08183 | (SRG / 02-Days) Gastric band ligation by Laparoscopy - Normal          | 15,725.00   |
| 184 | PKG08184 | (SRG / 02-Days) Gastric band ligation by Laparoscopy - Medium          | 18,750.00   |
| 185 | PKG08185 | (SRG / 01-Day) Gastric band ligation by Laparoscopy - Heavy            | 19,875.00   |
| 186 | PKG08186 | (SRG / 01-Day) Removal of gastric band by Laparoscopy                  | 9,700.00    |
| 187 | PKG08187 | (SRG / D Case) Gastric band port revision (LA)                         | 3,250.00    |
| 188 | PKG08188 | (SRG / D Case) Gastric band port revision (GA)                         | 4,162.50    |
| 189 | PKG08189 | (SRG / D Case) Gastric band port replacement (GA)                      | 7,762.50    |
| 190 | PKG08190 | (SRG / D Case) Insertion of Gastric Balloon                            | 6,812.50    |
| 191 | PKG08191 | (SRG / D Case) Removal of Gastric Balloon                              | 4,262.50    |
| 192 | PKG08192 | (SRG / 05-Days) Sleeve Gastrectomy (open)                              | 32,700.00   |
| 193 | PKG08193 | (SRG / 04-Days) Sleeve Gastrectomy (Lap)                               | 33,000.00   |
| 194 | PKG08194 | (SRG / 05-Days) Gastric Bypass (open)                                  | 36,350.00   |
| 195 | PKG08195 | (SRG / 04-Days) Gastric bypass (Lap)                                   | 36,650.00   |
| 196 | PKG08196 | (SRG / 02-Days) Gastrostomy or PEG                                     | 6,612.50    |
| 197 | PKG08197 | (SRG / 03-Days) Diaphragmatic Hernia                                   | 14,300.00   |
| 198 | PKG08198 | (SRG / 03-Days) Diaphragmatic Hernia - Laparoscopic                    | 15,550.00   |
| 199 | PKG08199 | (SRG / 03-Days) Open hiatus hernia repair + fundoplication             | 16,500.00   |
| 200 | PKG08200 | (SRG / 03-Days) Lap. Diaphragmatic hernia repair                       | 16,650.00   |
| 201 | PKG08201 | (SRG / 03-Days) Lap. Diaphragmatic hernia repair + Mesh                | 16,650.00   |
| 202 | PKG08202 | (SRG / 03-Days) Cardiomyotomy+Anterior fundoplication (open)           | 17,875.00   |
| 203 | PKG08203 | (SRG / 01-Day) Cardiomyotomy+Anterior fundoplication (laparoscopic)    | 16,325.00   |
| 204 | PKG08204 | (SRG / 01-Day) Repair of gastric or intestinal perforation             | 9,525.00    |
| 205 | PKG08205 | (SRG / 02-Days) Lap. closure of perforation of D.U.                    | 11,325.00   |
| 206 | PKG08206 | (SRG / 06-Days) Partial gastrectomy                                    | 17,300.00   |
| 207 | PKG08207 | (SRG / 04-Days) Partial gastrectomy + Gastrojejunostomy - Laparoscopic | 18,900.00   |
| 208 | PKG08208 | (SRG / 07-Days) Total Gastrectomy + Oesophagojejunostomy (simple loop) | 23,750.00   |
| 209 | PKG08209 | (SRG / 07-Days) Total Gastrectomy + Oesophagojejunostomy (Roux-en-y)   | 25,650.00   |
| 210 | PKG08210 | (SRG / 03-Days) Vagotomy and pyloroplasty (Open)                       | 13,875.00   |
| 211 | PKG08211 | (SRG / 03-Days) Vagotomy and pyloroplasty (Laparoscopy)                | 15,550.00   |
| 212 | PKG08212 | (SRG / 04-Days) Gastrojejunostomy - open                               | 14,375.00   |
| 213 | PKG08213 | (SRG / 04-Days) Gastrojejunostomy - laparoscopic                       | 16,750.00   |
| 214 | PKG08214 | (SRG / 04-Days) Vagotomy + gastrojejunostomy - open                    | 16,750.00   |
| 215 | PKG08215 | (SRG / 03-Days) Lap. vagotomy                                          | 16,650.00   |
| 216 | PKG08216 | (SRG / 03-Days) Congenital Pyloric stenosis                            | 8,950.00    |
| 217 | PKG08217 | (SRG / 03-Days) Resection anastomosis of bowel                         | 12,100.00   |
| 218 | PKG08218 | (SRG / 03-Days) Resection anastomosis of bowel (laparoscopic)          | 14,425.00   |



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AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE     | DESCRIPTION                                                                      | PRICE (SAR) |
|-----|----------|----------------------------------------------------------------------------------|-------------|
| 219 | PKG08219 | (SRG / 04-Days) Release of intestinal volvulus                                   | 13,125.00   |
| 220 | PKG08220 | (SRG / 05-Days) Right hemicolectomy                                              | 19,200.00   |
| 221 | PKG08221 | (SRG / 07-Days) Left hemicolectomy                                               | 21,600.00   |
| 222 | PKG08222 | (SRG / 07-Days) Anterior resection                                               | 26,250.00   |
| 223 | PKG08223 | (SRG / 05-Days) Hartman procedure                                                | 22,600.00   |
| 224 | PKG08224 | (SRG / 07-Days) Sigmoid Colectomy - open                                         | 24,400.00   |
| 225 | PKG08225 | (SRG / 07-Days) Abdominoperineal resection                                       | 34,600.00   |
| 226 | PKG08226 | (SRG / 05-Days) Reversal of Hartmann-open                                        | 17,400.00   |
| 227 | PKG08227 | (SRG / 03-Days) Rectal prolapse - Open                                           | 15,700.00   |
| 228 | PKG08228 | (SRG / 03-Days) Rectal prolapse - Laparoscopic                                   | 17,700.00   |
| 229 | PKG08229 | (SRG / 04-Days) Right hemicolectomy (Laparoscopic)                               | 20,800.00   |
| 230 | PKG08230 | (SRG / 05-Days) Left hemicolectomy (Laparoscopic)                                | 24,150.00   |
| 231 | PKG08231 | (SRG / 06-Days) Anterior resection (Laparoscopic)                                | 25,350.00   |
| 232 | PKG08232 | (SRG / 05-Days) Sigmoid Colectomy - Laparoscopic                                 | 22,000.00   |
| 233 | PKG08233 | (SRG / 05-Days) Reversal of Hartmann - Laparoscopic                              | 20,450.00   |
| 234 | PKG08234 | (SRG / 02-Days) Laparoscopic repair of rectal prolapse                           | 16,500.00   |
| 235 | PKG08235 | (SRG / 02-Days) Adrenalectomy-Unilateral-open                                    | 13,750.00   |
| 236 | PKG08236 | (SRG / 02-Days) Adrenalectomy-Bilateral-open                                     | 20,550.00   |
| 237 | PKG08237 | (SRG / 02-Days) Suprarenal tumor (Lap) - Unilateral                              | 14,350.00   |
| 238 | PKG08238 | (SRG / 02-Days) Suprarenal tumor (Lap) - Bilateral                               | 19,900.00   |
| 239 | PKG08239 | (SRG / 04-Days) Laparotomy + Excision of tumor (small)                           | 12,475.00   |
| 240 | PKG08240 | (SRG / 05-Days) Laparotomy + Excision of tumor (medium)                          | 16,100.00   |
| 241 | PKG08241 | (SRG / 05-Days) Laparotomy + Excision of tumor (large)                           | 18,850.00   |
| 242 | PKG08242 | (SRG / 01-Day) Laparoscopic cholecystectomy (single port)                        | 10,975.00   |
| 243 | PKG08243 | (SRG / 01-Day) Laparoscopic appendectomy (single port)                           | 13,225.00   |
| 244 | PKG08244 | (SRG / 02-Days) Laparoscopic splenectomy (single port)                           | 18,300.00   |
| 245 | PKG08245 | (SRG / 03-Days) Laparoscopic sleeve gastrectomy (single port)                    | 35,450.00   |
| 246 | PKG08246 | (SRG / 01-Day) Cervical Cerclage under G.A.                                      | 4,725.00    |
| 247 | PKG08247 | (SRG / 03-Days) Debridement and primary suture of wound without involvement of   | 11,300.00   |
| 248 | PKG08248 | (SRG / 01-Day) Laparoscopic colecystectomy with intraoperative colangioram       | 10,437.50   |
| 249 | PKG08249 | (SRG / 02-Days) Haemorrhoidectomy with HAL                                       | 8,412.50    |
| 250 | PKG08250 | (SRG / D Case) Excision of lesion of skin or subcutaneous tissue up to three und | 4,662.50    |
| 251 | PKG08251 | (SRG / 01-Day) Gastric Band Removal with Erosion                                 | 11,375.00   |
| 252 | PKG08252 | (SRG / 14 Day) Tram flap reconstruction for Mastectomy                           | 149,701.00  |
| 253 | PKG08253 | (SRG / D Case) Stomafix Procedure                                                | 15,305.00   |
| 254 | PKG08254 | (SRG / 01-Day) OGD + Oesophageal Stenting                                        | 10,625.00   |
| 255 | PKG08255 | (SRG / 04-Days) Cholecystectomy with exploration (open)                          | 16,150.00   |
| 256 | PKG08256 | (SRG / 01-Day) Drainage through perineal region including ischio-rectal absce    | 4,262.50    |
| 257 | PKG08257 | (SRG / 02-Days) Open embolectomy of artery                                       | 10,900.00   |
| 258 | PKG08258 | (SRG / 01-Day) Repair of umbilical hernia irrespective of age (Open)             | 7,200.00    |
| 259 | PKG08259 | (SRG / 01-Day) Drainage of large abscess under GA                                | 4,912.50    |
| 260 | PKG08260 | (SRG / D Case ) Excision of lesion of skin or subcutaneous tissue - four or more | 4,412.50    |
| 261 | PKG08261 | (SRG / 05-Days) Congenital intestinal stricture - conclusive                     | 16,100.00   |
| 262 | PKG08262 | (SRG / 06-Days) Cholecystectomy with Choledochenterostomy                        | 21,950.00   |
| 263 | PKG08263 | (SRG / 07-Days) Biliary Duct Repair Anastomosis Extra biliary ducts + GIT        | 28,150.00   |
| 264 | PKG08264 | (SRG / 07-Days) Biliary Duct stricture Repair Anastomosis Intra biliary ducts    | 29,400.00   |
| 265 | PKG08265 | (SRG / 07-Days) Biliary Duct Stricture Repair Anastomosis Reny Extra biliary     | 26,250.00   |
| 266 | PKG08266 | (SRG / 07-Days) Intra Hepatic Biliary Duct + GIT Anastomosis Roux-En-Y           | 31,550.00   |
| 267 | PKG08267 | (SRG / 07-Days) CBD Reconstruction plas of Extrahepatic+EndtoEnd Anastomosis     | 26,900.00   |
| 268 | PKG08268 | (SRG / 07-Days) Repair of gastro-intestinal fistula                              | 19,750.00   |
| 269 | PKG08269 | (SRG / 02-Days) Gastric band ligation by Laparoscopy                             | 14,350.00   |
| 270 | PKG08270 | (SRG / 05-Days) Splenectomy (Lap)                                                | 17,350.00   |
| 271 | PKG08271 | (SRG / 07-Days) Gastro Oesophectomy                                              | 38,750.00   |
| 272 | PKG08272 | (SRG / 03-Days) Trans-Oral Endoscopic Hiatus Hernia Repair                       | 17,450.00   |

Mustafa El-Ahwal (MBA, FCA, ACCA)  
Director of Finance  
Al-Ahli Hospital

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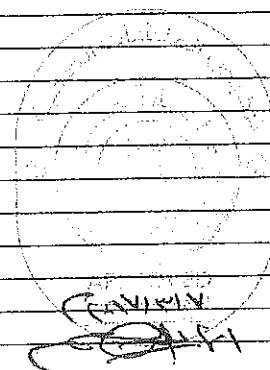
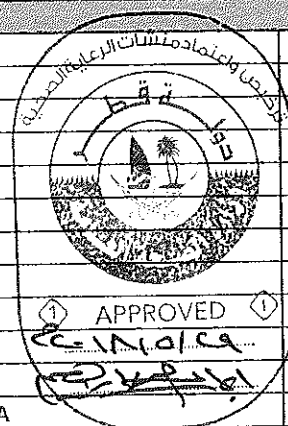


# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

المستشفى الأهلي  
AL-AHLI HOSPITAL

| SR                                    | CODE     | DESCRIPTION                                                                          | PRICE (QAR) |
|---------------------------------------|----------|--------------------------------------------------------------------------------------|-------------|
| 273                                   | PKG08273 | (SRG / 05-Days) Reversal of Gastric-Bypass (open or Lap.)                            | 36,350.00   |
| 274                                   | PKG08274 | (SRG / 05-Days) Reversal of Hartman with ileostomy (open or Lap.)                    | 21,700.00   |
| 275                                   | PKG08275 | (SRG / 05-Days) Reversal of Hartman (open or Lap)                                    | 20,450.00   |
| 276                                   | PKG08276 | (SRG / 05-Days) Laparoscopic colecystectomy with lap. exploration com bile duct      | 17,600.00   |
| 277                                   | PKG08277 | (SRG / D Case)Liposuction of Abdomen under GA                                        | 11,000.00   |
| 278                                   | PKG08278 | (SRG/ 01 Day) Radiofreq Ablation of Varicose Veins +/- Multiple Stab Avulsions-1limb | 12,800.00   |
| 279                                   | PKG08279 | (SRG/ 01Day) Radiofreq Ablation of Varicose Veins +/- Multiple Stab Avulsions-2limb  | 17,000.00   |
| 280                                   | PKG08280 | (SRG/ 01 Day) Trans Oral Anti Reflux Surgery                                         | 17,000.00   |
| 281                                   | PKG08281 | (SRG/ 01 Day) Primary Obesity Surgery Endolumenal (POSE) Procedure                   | 21,500.00   |
| 282                                   | PKG08282 | (SRG/ 01 Day) Insertion of Spatz Ballon                                              | 6,813.00    |
| 283                                   | PKG08283 | (SRG/ 01 Day) Removal of OBALON                                                      | 4,263.00    |
| 284                                   | PKG08284 | (SRG/01 day)Removal of Spatz Balloon                                                 | 4,263.00    |
| 285                                   | PKG08285 | (SRG / D Case) Botox Injection for Weight Loss Through OGD                           | 14,750.00   |
| 286                                   | PKG08286 | (SRG / D Case) Stretta (Cautery of Lower Esphagus for Reflux Surgery)                | 7,750.00    |
| 287                                   | PKG08287 | (SRG / 2 Days) Breast Implant (Excluding Implant)                                    | 37,000.00   |
| <b>Clinical Services / Procedures</b> |          |                                                                                      |             |
| 1                                     | SRG0001  | Dressing-Simple                                                                      | 200.00      |
| 2                                     | SRG0002  | Dressings- Complex                                                                   | 350.00      |
| 3                                     | SRG0003  | (Surg - Sub-Op) Dressing of Wound Abscess                                            | 400.00      |
| 4                                     | SRG0004  | Suturing - Simple                                                                    | 250.00      |
| 5                                     | SRG0005  | Suturing-Complex                                                                     | 500.00      |
| 6                                     | SRG0006  | Diagnostic aspiration of cysts,joints,cavities                                       | 500.00      |
| 7                                     | SRG0007  | Minor Surgery under LA                                                               | 1,500.00    |
| 8                                     | SRG0008  | Circumcision under LA                                                                | 1,500.00    |
| 9                                     | SRG0009  | Biopsy of skin or subcutaneous tissue                                                | 500.00      |
| 10                                    | SRG0010  | Debridement of wound (surgical toilet)                                               | 1,200.00    |
| 11                                    | SRG0011  | Secondary suture of skin under LA                                                    | 1,500.00    |
| 12                                    | SRG0012  | Excision of lesion of skin or subcutaneous tissue four or more under LA              | 1,500.00    |
| 13                                    | SRG0013  | Excision of lesion of skin or subcutaneous tissue up to three under LA               | 1,500.00    |
| 14                                    | SRG0014  | Drainage of lesion of skin including abscess                                         | 500.00      |
| 15                                    | SRG0015  | Rigid sigmoidoscopy including biopsy                                                 | 1,500.00    |
| 16                                    | SRG0016  | Suture of lip under LA                                                               | 1,500.00    |
| 17                                    | SRG0017  | Suture of mouth under LA                                                             | 1,150.00    |
| 18                                    | SRG0018  | Suturing of tongue under LA                                                          | 1,500.00    |
| 19                                    | SRG0019  | Excision of Sebaceous cyst under LA                                                  | 1,500.00    |
| 20                                    | SRG0020  | Excision of Lipoma under LA                                                          | 150.00      |
| 21                                    | SRG0021  | Suture Removal                                                                       | 350.00      |
| 22                                    | SRG0022  | Suture Removal (Big)                                                                 | 1,500.00    |
| 23                                    | SRG0023  | Ingrowing Toe nail removal under LA                                                  | 3,212.50    |
| 24                                    | SRG0024  | Primary suture of wound with involvement of deeper tissue                            | 950.00      |
| 25                                    | SRG0025  | Injection sclerotherapy of haemorrhoids in clinic                                    | 950.00      |
| 26                                    | SRG0026  | Injection of sclerotherapy of varicose veins in clinic                               | 200.00      |
| 27                                    | SRG0027  | Wound Care -Simple                                                                   | 1,500.00    |
| 28                                    | SRG0028  | Minor Procedures                                                                     | 200.00      |
| 29                                    | SRG0029  | Dressing                                                                             | 3,412.50    |
| 30                                    | SRG0030  | Removal of foreign body in deeper tissue                                             | 1,500.00    |
| 31                                    | SRG0031  | Suturing of wounds - LA                                                              | 2,800.00    |
| 32                                    | SRG0032  | Duct Dilation                                                                        | 2,600.00    |
| 33                                    | SRG0033  | Stones Removal                                                                       | 2,000.00    |
| 34                                    | SRG0034  | Bone Cysts Small 1 Tooth Area                                                        | 1,500.00    |
| 35                                    | SRG0035  | Avulsed Teeth Splinting One Tooth                                                    | 3,000.00    |
| 36                                    | SRG0036  | Avulsed Teeth Splinting Multiple Teeth                                               | 2,000.00    |
| 37                                    | SRG0037  | Removal Of Imf                                                                       | 2,100.00    |
| 38                                    | SRG0038  | Soft Tissue Laceration Small Facial                                                  |             |



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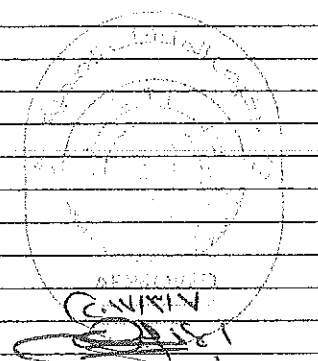




# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

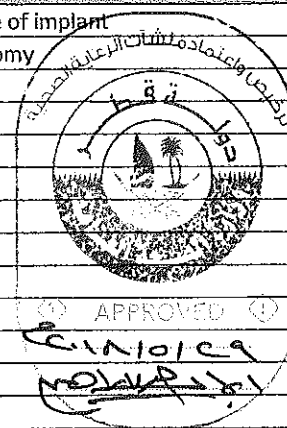
| SR | CODE    | DESCRIPTION                                                 | PRICE (QAR) |
|----|---------|-------------------------------------------------------------|-------------|
| 39 | SRG0039 | Abscess Drainage Intraoral                                  | 1,000.00    |
| 40 | SRG0040 | Masseteric Hypertrophy Botox                                | 3,000.00    |
| 41 | SRG0041 | Myofascial Pain Botox                                       | 3,000.00    |
| 42 | SRG0042 | Rhytids ( Per Unit) Botox                                   | 3,000.00    |
| 43 | SRG0043 | Frey Syndrome (Facial Salivation) Botox                     | 2,000.00    |
| 44 | SRG0044 | Juvederm Naso- Labial Enhancement Dermal Fillers            | 3,000.00    |
| 45 | SRG0045 | Flap Surgery Oral Laser                                     | 1,700.00    |
| 46 | SRG0046 | Fraenectomy Laser                                           | 1,500.00    |
| 47 | SRG0047 | Excision Of Lesion Oral Laser                               | 1,300.00    |
| 48 | SRG0048 | Ablation Of White Patch Or Melanosis Of Gums Laser          | 1,700.00    |
| 49 | SRG0049 | Haemangioma Small Laser                                     | 1,300.00    |
| 50 | SRG0050 | Facial Telangectasia/ Cherry Angioma Laser                  | 1,300.00    |
| 51 | SRG0051 | Facial Naevus/ Actinic Keratosis/ Seborheic Keratosis Laser | 1,300.00    |
| 52 | SRG0052 | Facial Scar/ Acne Scar Laser                                | 1,000.00    |
| 53 | SRG0053 | Facial Skin Lesion Excision                                 | 1,750.00    |
| 54 | SRV0037 | Gastric band adjustment                                     | 880.00      |
| 55 | SRG0054 | OBALON- Balloon Insertion                                   | 12,000.00   |



## UROLOGY

### Packages

|    |          |                                                                                  |           |
|----|----------|----------------------------------------------------------------------------------|-----------|
| 1  | PKG09001 | (URL /03-Days) Implantation of artificial urinary sphincter w/o price of implant | 22,875.00 |
| 2  | PKG09002 | (URL / 05-Days) Renal tumour enucleation and/or Partial nephrectomy              | 16,575.00 |
| 3  | PKG09003 | (URL / 05-Days) Radical nephrectomy                                              | 19,687.50 |
| 4  | PKG09004 | (URL / 05-Days) Nephroureterctomy                                                | 18,075.00 |
| 5  | PKG09005 | (URL / D Case) Renal cyst aspiration ( P/C )                                     | 3,062.50  |
| 6  | PKG09006 | (URL / 04-Days) Excision of simple renal cyst & marsupialization                 | 10,350.00 |
| 7  | PKG09007 | (URL / 05-Days) Exploration of kidney in trauma without repair                   | 15,200.00 |
| 8  | PKG09008 | (URL / 05-Days) Pyeloplasty                                                      | 15,250.00 |
| 9  | PKG09009 | (URL / 05-Days) Pyelo-nephrolithotomy                                            | 13,162.50 |
| 10 | PKG09010 | (URL / 04-Days) Pyelolithotomy                                                   | 15,325.00 |
| 11 | PKG09011 | (URL / 04-Days) Drainage of perinephric abscess                                  | 12,350.00 |
| 12 | PKG09012 | (URL / 04-Days) Percutaneous nephrolithotomy (PCNL)                              | 16,550.00 |
| 13 | PKG09013 | (URL / D Case) Cystourethroscopy + retrograde urography                          | 3,875.00  |
| 14 | PKG09014 | (URL / D Case) Cystourethroscopy + JJ stenting                                   | 5,625.00  |
| 15 | PKG09015 | (URL / D Case) Cystourethroscopy + JJ stent removal                              | 5,512.50  |
| 16 | PKG09016 | (URL / 01-Day) Cystourethroscopy + Dormai stone retrieval                        | 6,225.00  |
| 17 | PKG09017 | (URL / D Case) Uretero-rensoscopy (Rigid - Diagnostic)                           | 6,700.00  |
| 18 | PKG09018 | (URL / 01-Day) Uretero - stone disintegration and/or extraction                  | 7,562.50  |
| 19 | PKG09019 | (URL / 03-Days) Ureterolithotomy                                                 | 17,237.50 |
| 20 | PKG09020 | (URL / 01-Day) Uretero-rensoscopy (flexible)                                     | 6,950.00  |
| 21 | PKG09021 | (URL / 01-Day) Balloon ureteric stricture dilatation                             | 8,250.00  |
| 22 | PKG09022 | (URL / 01-Day) Cystoscopic ureterocele derroofing                                | 7,650.00  |
| 23 | PKG09023 | (URL / 04-Days) Ureteroneocystostomy ( reimplantation )                          | 18,825.00 |
| 24 | PKG09024 | (URL / 04-Days) Ureterolysis with omental wrap (retroperit. fibrosis)            | 23,525.00 |
| 25 | PKG09025 | (URL / 05-Days) Transuretero-ureterostomy                                        | 21,937.50 |
| 26 | PKG09026 | (URL / 04-Days) Resection anastomosis for ureteric stricture                     | 17,912.50 |
| 27 | PKG09027 | (URL / D Case) Diagnostic cystourethroscopy - Rigid                              | 3,075.00  |
| 28 | PKG09028 | (URL / D Case) Diagnostic cystourethroscopy - Flexible (Sedation + LA)           | 2,712.50  |
| 29 | PKG09029 | (URL / D Case) Cystourethroscopy +Biopsy                                         | 3,062.50  |
| 30 | PKG09030 | (URL / 01-Day) Cystourethroscopy + Cysto-lithotripsy                             | 7,012.50  |
| 31 | PKG09031 | (URL / 03-Days) Cystourethroscopy +Bladder neck resection                        | 8,650.00  |
| 32 | PKG09032 | (URL / 01-Day) Cystoscopy and teflon injection bladder (incontinence or reflux)  | 7,150.00  |
| 33 | PKG09033 | (URL / 01-Day) Bladder tumor (TURT) - small (confined)                           | 6,162.50  |



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AL-AHLI HOSPITAL  
Finance Department

Mesuda El-Ahwal (MBA, PCA, ACCA)  
Director of Finance  
Al-Ahli Hospital



# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR | CODE     | DESCRIPTION                                                                    | PRICE (QAR) |
|----|----------|--------------------------------------------------------------------------------|-------------|
| 34 | PKG09034 | (URL / 02-Days) Bladder tumor (TURB)- large ( extensive )                      | 10,700.00   |
| 35 | PKG09035 | (URL / 01-Day) Clot evacuation                                                 | 3,912.50    |
| 36 | PKG09036 | (URL / 03-Days) Cystodiverticulectomy                                          | 20,400.00   |
| 37 | PKG09037 | (URL / 02-Days) Cystolithotomy                                                 | 7,050.00    |
| 38 | PKG09038 | (URL / 04-Days) Transrectal or perineal prostate biopsy                        | 7,312.50    |
| 39 | PKG09039 | (URL / 03-Days) Transurethral prostate resection (TURP)                        | 16,500.00   |
| 40 | PKG09040 | (URL / 03-Days) Transurethral incision of prostate (TUIP)                      | 13,175.00   |
| 41 | PKG09041 | (URL / 02-Days) Transurethral drainage of prostatic abscess                    | 9,187.50    |
| 42 | PKG09042 | (URL / 05-Days) Open radical prostatectomy ( retropubic )                      | 35,412.50   |
| 43 | PKG09043 | (URL / 01-Day) Cystourethroscopy + internal urethrotomy                        | 5,712.50    |
| 44 | PKG09044 | (URL / 01-Day) Cystourethroscopy + anterior urethral stone                     | 5,875.00    |
| 45 | PKG09045 | (URL / 03-Days) Meatotomy                                                      | 7,012.50    |
| 46 | PKG09046 | (URL / 01-Day) MAGPI                                                           | 7,637.50    |
| 47 | PKG09047 | (URL / 03-Days) Snodgrass- distal                                              | 13,562.50   |
| 48 | PKG09048 | (URL / 03-Days) Onlay-flap procedure - proximal                                | 16,562.50   |
| 49 | PKG09049 | (URL / 03-Days) Graft urethroplasties: buccal mucosa                           | 20,837.50   |
| 50 | PKG09050 | (URL / D Case) Dorsal slit- e. g. Phimosis-G.A                                 | 3,912.50    |
| 51 | PKG09051 | (URL / D Case) Preputial adhesions                                             | 3,212.50    |
| 52 | PKG09052 | (URL / 01-Day) Nesbit's procedure e.g. Peyronie's disease                      | 6,762.50    |
| 53 | PKG09053 | (URL / D Case) Fulgration of penile wart                                       | 6,162.50    |
| 54 | PKG09054 | (URL / D Case) Excision of penile lesion                                       | 3,175.00    |
| 55 | PKG09055 | (URL / 01-Day) Excision of epididymal cyst                                     | 6,100.00    |
| 56 | PKG09056 | (URL / 01-Day) Exploration of testis & proceed                                 | 5,512.50    |
| 57 | PKG09057 | (URL / 01-Day) Exploration of testis & proceed - torsion                       | 7,262.50    |
| 58 | PKG09058 | (URL / 01-Day) Exploration of testis & proceed - trauma                        | 6,750.00    |
| 59 | PKG09059 | (URL / D Case) Testicular biopsy ( open )                                      | 2,775.00    |
| 60 | PKG09060 | (URL / 01-Day) Epididymectomy                                                  | 6,162.50    |
| 61 | PKG09061 | (URL / 01-Day) Scrotal gangrene                                                | 4,725.00    |
| 62 | PKG09062 | (URL / 01-Day) Hematocele                                                      | 6,300.00    |
| 63 | PKG09063 | (URL / 01-Day) Vaso-vasostomy                                                  | 14,200.00   |
| 64 | PKG09064 | (URL / 01-Day) Epididymo-vasostomy                                             | 16,487.50   |
| 65 | PKG09065 | (URL / 03-Days) Penile prosthesis implanatation w/o implant price              | 18,837.50   |
| 66 | PKG09066 | (URL / D Case) Cystourethroscopy                                               | 4,200.00    |
| 67 | PKG09067 | (URL / D Case) Urethral calibration and dilation                               | 3,475.00    |
| 68 | PKG09068 | (URL / 01-Day) Laparoscopic high ligation unilateral                           | 7,400.00    |
| 69 | PKG09069 | (URL / 01-Day) Laparoscopic high ligation bilateral                            | 9,750.00    |
| 70 | PKG09070 | (URL / 01-Day) Laparoscopic pyeloplasty                                        | 24,362.50   |
| 71 | PKG09071 | (URL / 03-Days) Laparoscopic Nephrectomy                                       | 26,175.00   |
| 72 | PKG09072 | (URL / 01-Day) Laparoscopic orchidopexy                                        | 10,837.50   |
| 73 | PKG09073 | (URL / 01-Day) Transrectal or perineal prostate biopsy + Ultrasound (under GA) | 4,212.50    |
| 74 | PKG09074 | (URL / 01-Day) Transvaginal Tape insertion (TVT) including prosthesis          | 15,462.50   |
| 75 | PKG09075 | (URL / 01-Day) Flexible Renoscopy & Laser Treatment for Stone                  | 8,900.00    |
| 76 | PKG09076 | (URL / 05-Days) Ileal Loop Urine Diversion                                     | 37,612.50   |
| 77 | PKG09077 | (URL / D Case) Transrectal or perineal prostate biopsy + Ultrasound (under LA) | 2,900.00    |
| 78 | PKG09078 | (URL / 05-Days) Recurrent pyelolithotomy                                       | 23,275.00   |
| 79 | PKG09079 | (URL / 03-Days) Percutaneous nephrostomy for modification                      | 11,825.00   |
| 80 | PKG09080 | (URL / 04-Days) Adrenalectomy                                                  | 14,925.00   |
| 81 | PKG09081 | (URL / 01-Day) Ureteric meatotomy                                              | 5,650.00    |
| 82 | PKG09082 | (URL / 01-Day) Open Ureterocele excision                                       | 8,875.00    |
| 83 | PKG09083 | (URL / 04-Days) Repair of ureteric injury                                      | 20,225.00   |
| 84 | PKG09084 | (URL / D Case) Cystourethroscopy +instillation of chemicals                    | 9,075.00    |
| 85 | PKG09085 | (URL / 04-Days) Bladder neck reconstruction                                    | 19,075.00   |
| 86 | PKG09086 | (URL / D Case) Bladder overdistension                                          | 12,575.00   |
| 87 | PKG09087 | (URL / 05-Days) Cystectomy for benign disease                                  | 24,425.00   |

Mustafa El-Ahwal (MBA, FCA, ACCA)

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| SR                             | CODE     | DESCRIPTION                                                               | PRICE (QAR) |
|--------------------------------|----------|---------------------------------------------------------------------------|-------------|
| 88                             | PKG09088 | (URL / 05-Days) Partial cystectomy                                        | 23,425.00   |
| 89                             | PKG09089 | (URL / 08-Days) Radical cystectomy (in addition a form of CUD)            | 38,325.00   |
| 90                             | PKG09090 | (URL / 05-Days) P/C S/P cystostomy                                        | 13,825.00   |
| 91                             | PKG09091 | (URL / D Case) Meatoplasty                                                | 4,650.00    |
| 92                             | PKG09092 | (URL / 03-Days) Snodgrass - proximal                                      | 17,225.00   |
| 93                             | PKG09093 | (URL / 03-Days) Meatus-based urethroplasty (Matheiu)                      | 14,725.00   |
| 94                             | PKG09094 | (URL / 03-Days) Onlay-flap procedure - distal                             | 14,725.00   |
| 95                             | PKG09095 | (URL / 03-Days) Urethrocuteaneous fistula                                 | 15,625.00   |
| 96                             | PKG09096 | (URL / 03-Days) Excision of urethral diverticulum                         | 13,425.00   |
| 97                             | PKG09097 | (URL / 01-Day) Ureteroscopic Laser Disintegration                         | 12,075.00   |
| 98                             | PKG09098 | (URL / 04-Days) Nephrectomy for benign disease                            | 14,225.00   |
| 99                             | PKG09099 | (URL / 05-Days) Transplant nephrectomy                                    | 13,100.00   |
| 100                            | PKG09100 | (URL / 04-Days) Repair of renal injury                                    | 20,000.00   |
| 101                            | PKG09101 | (URL / 04-Days) Nephrolithotomy - staghorn                                | 18,725.00   |
| 102                            | PKG09102 | (URL / 05-Days) Replacement of ureter by bowel segment                    | 28,275.00   |
| 103                            | PKG09103 | (URL / 05-Days) Repair of retrocaval ureter                               | 24,700.00   |
| 104                            | PKG09104 | (URL / 05-Days) Incontinent forms- ileal conduit (Bricker's)              | 21,500.00   |
| 105                            | PKG09105 | (URL / 05-Days) Colon conduit                                             | 21,500.00   |
| 106                            | PKG09106 | (URL / 01-Day) Pyelostomy                                                 | 9,150.00    |
| 107                            | PKG09107 | (URL / 01-Day) Ureterostomy                                               | 9,150.00    |
| 108                            | PKG09108 | (URL / 02-Days) Open Cystostomy                                           | 10,350.00   |
| 109                            | PKG09109 | (URL / 05-Days) Continant forms: catheterizable stoma: e.g. Mainz pouch I | 52,350.00   |
| 110                            | PKG09110 | (URL / 06-Days) Bladder substitution: ( Bowel )                           | 47,400.00   |
| 111                            | PKG09111 | (URL / 02-Days) Repair of fistulae (open)-vesico-vaginal small            | 17,637.50   |
| 112                            | PKG09112 | (URL / 04-Days) Repair of fistulae (open)-vesico-vaginal large            | 27,500.00   |
| 113                            | PKG09113 | (URL / 05-Days) Repair of fistulae - colo-vesical                         | 28,700.00   |
| 114                            | PKG09114 | (URL / 04-Days) Repair of fistulae - ureterovaginal                       | 27,500.00   |
| 115                            | PKG09115 | (URL / 04-Days) Suture and repair of bladder rupture                      | 12,800.00   |
| 116                            | PKG09116 | (URL / 02-Days) Transrectal drainage of prostate abscess                  | 6,462.50    |
| 117                            | PKG09117 | (URL / 05-Days) Open prostatectomy ( Millin's or transvesical )           | 20,500.00   |
| 118                            | PKG09118 | (URL / 03-Days) Cystourethroscopy + fulgration PUV                        | 8,562.50    |
| 119                            | PKG09119 | (URL / 04-Days) Anterior urethroplasty - resection anastomosis            | 12,900.00   |
| 120                            | PKG09120 | (URL / 04-Days) Anterior urethroplasty - onlay patch flap or graft        | 17,725.00   |
| 121                            | PKG09121 | (URL / 02-Days) Urethral injury repair with rail-road technique           | 13,525.00   |
| 122                            | PKG09122 | (URL / 05-Days) Repair of ruptured urethra                                | 13,950.00   |
| 123                            | PKG09123 | (URL / 03-Days) Urethrectomy                                              | 12,350.00   |
| 124                            | PKG09124 | (URL / 03-Days) Chordectomy & orthoplasty                                 | 6,912.50    |
| 125                            | PKG09125 | (URL / 02-Days) Priapism evacuation-G.A                                   | 5,712.50    |
| 126                            | PKG09126 | (URL / 01-Day) Varicocele                                                 | 6,750.00    |
| 127                            | PKG09127 | (URL / 03-Days) Retroperitoneal lymphadenectomy for testicular tumor      | 18,837.50   |
| 128                            | PKG09128 | (URL / 01-Day) Testicular prosthesis implantation w/o implant price       | 6,750.00    |
| 129                            | PKG09129 | (URL / 02-Days) Scrotal injury repair                                     | 6,312.50    |
| 130                            | PKG09130 | (URL / 01-Day) Repair of penile fracture                                  | 7,450.00    |
| 131                            | PKG09131 | (URL / 04-Days) Epispadias repair ( proximal )                            | 20,850.00   |
| 132                            | PKG09132 | (URL / 03-Days) Laparoscopic Renal Cyst Ablation                          | 22,650.00   |
| 133                            | PKG09133 | (URL / 07-Days Room and 01-Day ICU) Laparoscopic Radical Prostatectomy    | 49,975.00   |
| 134                            | PKG09134 | (URL / 01-Day) Radical Orchidectomy                                       | 10,300.00   |
| 135                            | PKG09135 | (URL/D Case) Testicular biopsy                                            | 6,450.00    |
| 136                            | PKG09136 | (URL/D Case) Percutaneous Testicular Sperm Aspiration                     | 6,350.00    |
| 137                            | PKG09137 | (URL/ D Case) Percutaneous Epididymal Sperm Aspiration                    | 6,350.00    |
| 138                            | PKG09138 | (URL / 1 Day )Removal of Buccal Mucosal Graft                             | 8,000.00    |
| Clinical Services / Procedures |          |                                                                           |             |
| 1                              | URL0001  | Urology - U/S Prostate                                                    | 400.00      |
| 2                              | URL0002  | Urology - U/S Abdomen                                                     | 400.00      |

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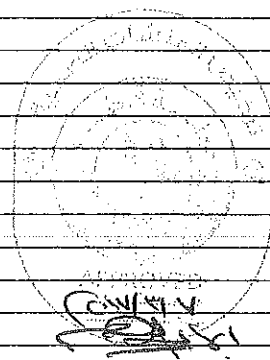


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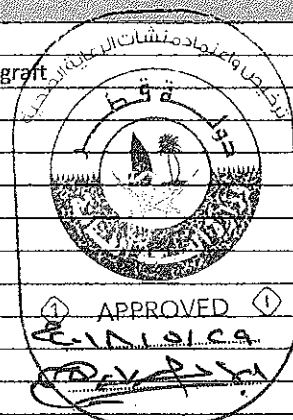
# AL-AHLI HOSPITAL PRICE LIST

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| SR | CODE    | DESCRIPTION                                          | PRICE (QAR) |
|----|---------|------------------------------------------------------|-------------|
| 3  | URL0003 | Urology - U/S Scrotum Doppler                        | 400.00      |
| 4  | URL0004 | Intra-vesical Chemotherapy - per dose                | 1,400.00    |
| 5  | URL0005 | Intra-vesical Chemotherapy - full course             | 15,000.00   |
| 6  | URL0006 | Cystometry                                           | 1,900.00    |
| 7  | URL0007 | Cystometry + Video (C- Arm)                          | 2,850.00    |
| 8  | URL0008 | Urinalysis, Dipstick (Glucose, Acetone, PH, Protein) | 30.00       |
| 9  | URL0009 | Single session, under conscious sedation Lithotripsy | 4,850.00    |
| 10 | URL0010 | Intermittent Catheterization                         | 500.00      |
| 11 | URL0011 | Erectile Dysfunction Monitoring & Reporting          | 650.00      |
| 12 | URL0012 | Prosthesis                                           | 41,800.00   |
| 13 | SRV0069 | Prostate massage                                     | 110.00      |
| 14 | SRV0079 | Urethral dilatation                                  | 1,100.00    |
| 15 | SRV0082 | Uroflometry Test                                     | 170.00      |



| VASCULAR |          |                                                                         |           |
|----------|----------|-------------------------------------------------------------------------|-----------|
| Packages |          |                                                                         |           |
| 1        | PKG14001 | (VAS/ 2days) Carotid Endarterectomy                                     | 27,650.00 |
| 2        | PKG14002 | (VAS/ 3days) Femoro popliteal bypass with vein graft or synthetic graft | 34,800.00 |
| 3        | PKG14003 | (VAS/ 4days) Aortobifemoral bypass                                      | 38,300.00 |
| 4        | PKG14004 | (VAS/ 3days) Axillobifemoral bypass                                     | 34,800.00 |
| 5        | PKG14005 | (VAS/ 3days) Femoro tibial bypass                                       | 34,800.00 |
| 6        | PKG14006 | (VAS/ 3days) Femoro peroneal bypass                                     | 34,800.00 |
| 7        | PKG14007 | (VAS/ 2days) Femoro femoral bypass                                      | 26,100.00 |
| 8        | PKG14008 | (VAS/ 3days) Femoral Endarterectomy                                     | 28,500.00 |
| 9        | PKG14009 | (VAS/ 3days) Graft thrombectomy                                         | 24,450.00 |
| 10       | PKG14010 | (VAS/ 1day) Creation of arteriovenous fistula for haemodialysis         | 14,950.00 |
| 11       | PKG14011 | (VAS/ 1day) Basilic vein transposition for haemodialysis                | 14,950.00 |
| 12       | PKG14012 | (VAS/ 4days) Iliofemoral bypass                                         | 38,300.00 |
| 13       | PKG14013 | (VAS/ 2days) Insertion of Tenchoff catheter for peritoneal dialysis     | 23,850.00 |
| 14       | PKG14014 | (VAS/ 1day) Temporal artery biopsy                                      | 14,950.00 |
| 15       | PKG14015 | (VAS/ 1day) Insertion of central line permcath for haemodialysis        | 14,850.00 |
| 16       | PKG14016 | (VAS/ 1day) Balloon angioplasty open and percutaneous                   | 16,500.00 |
| 17       | PKG14017 | (VAS/ 3days) Embolectomy of coeliac artery                              | 30,100.00 |
| 18       | PKG14018 | (VAS/ 3days) Repair of false aneurysm                                   | 30,100.00 |
| 19       | PKG14019 | (VAS/ 3days) Carotid to Subclavian bypass                               | 30,100.00 |
| 20       | PKG14020 | (VAS/ 3days) Thoracic outlet decompression                              | 28,500.00 |
| 21       | PKG14021 | (VAS/ 3days) Ligation of Artery for aneurysms.                          | 25,300.00 |
| 22       | PKG14022 | (VAS/ 1day) Excision of haemangioma.                                    | 19,850.00 |
| 23       | PKG14023 | (VAS/ 5days) Repair of Artery                                           | 40,900.00 |



| GENERAL SERVICES |          |                                                                  |          |
|------------------|----------|------------------------------------------------------------------|----------|
| Packages         |          |                                                                  |          |
| 1                | PKG12005 | Radiation screening (with Semen Analysis)                        | 1,000.00 |
| 2                | PKG12006 | Radiation screening (w/o Semen Analysis)                         | 800.00   |
| 3                | PKG12007 | Pre-Employment Examination-PWC                                   | 1,535.00 |
| 4                | HSP0001  | Health Screen Package for Men & Women Age 40 or Below            | 3,300.00 |
| 5                | HSP0002  | Health Screen Man Package - 40 years and above (Comprehensive)   | 4,300.00 |
| 6                | HSP0003  | Health Screen Woman Package - 40 years and above (Comprehensive) | 4,500.00 |
| Accommodation    |          |                                                                  |          |
| 1                | ACM0001  | Single Suite                                                     | 1,200.00 |
| 2                | ACM0002  | Deluxe Suit                                                      | 1,800.00 |
| 3                | ACM0003  | VIP Deluxe Suite                                                 | 3,600.00 |
| 4                | ACM0004  | Royal Suite                                                      | 6,000.00 |

AL-AHLI HOSPITAL  
Finance Department

Must be signed by (MD, PCA, ACCA)  
Director of Finance  
Al-Ahli Hospital



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Date: 12-Feb-17

| SR                  | CODE    | DESCRIPTION                                                          | PRICE (QAR) |
|---------------------|---------|----------------------------------------------------------------------|-------------|
| 5                   | ACM0005 | C.C.U                                                                | 2,000.00    |
| 6                   | ACM0006 | ICU                                                                  | 2,000.00    |
| 7                   | ACM0007 | ICU care - Step Down Accommodation                                   | 1,200.00    |
| 8                   | ACM0008 | Day Case Room - less than 6 hours                                    | 500.00      |
| 9                   | ACM0009 | Day Case Room - more than 6 hours                                    | 600.00      |
| 10                  | ACM0010 | Accommodation Difference (Single - Deluxe Suite)                     | 600.00      |
| 11                  | ACM0011 | Accommodation Difference (Single - VIP Suite)                        | 2,400.00    |
| 12                  | ACM0012 | Accommodation Difference (Single - Royal Suite)                      | 4,800.00    |
| 13                  | ACM0013 | Labor & Delivery Room                                                | 1,500.00    |
| 14                  | ACM0014 | New Born Unit charges/day ? Observation                              | 1,100.00    |
| 15                  | ACM0015 | New Born Unit charges/day - Intermediate care                        | 1,450.00    |
| 16                  | ACM0016 | New Born Unit charges/day ? NICU                                     | 1,900.00    |
| 17                  | ACM0017 | New Born Unit charges/day ? Isolation                                | 300.00      |
| 18                  | ACM0018 | New Born Unit charges/day - Nursery                                  | 450.00      |
| 19                  | ACM0019 | OR Charges - First hour                                              | 1,950.00    |
| 20                  | ACM0020 | OR Charges (2 Hours)                                                 | 3,400.00    |
| 21                  | ACM0021 | OR Charges (3 Hours)                                                 | 4,850.00    |
| 22                  | ACM0022 | OR Charges -Each 15 Minutes                                          | 500.00      |
| 23                  | ACM0023 | OR Charges (Dental Only)                                             | 1,500.00    |
| 24                  | ACM0024 | OR Charges Dental (2 Hours)                                          | 3,000.00    |
| 25                  | ACM0025 | OR Charges Dental (3 Hours)                                          | 4,500.00    |
| 26                  | ACM0026 | OR Charges Dental (subsequent 15 mins)                               | 375.00      |
| 27                  | ACM0027 | Accommodation Difference (Single - ICU / CCU)                        | 800.00      |
| 28                  | ACM0033 | Room Charges Per Day - Medically Discharged Guest (Single Room)      | 5,000.00    |
| 29                  | ACM0034 | Room Charges Per Day - Medically Discharged Guest (Deluxe Suite)     | 6,500.00    |
| 30                  | ACM0035 | Room Charges Per Day - Medically Discharged Guest (VIP Deluxe Suite) | 8,000.00    |
| 31                  | ACM0036 | Room Charges Per Day - Medically Discharged Guest (Royal Suite)      | 10,000.00   |
| 32                  | ACM0037 | Day Case Room-ICU/CCU - less than 6 hours                            | 800.00      |
| <b>Consultation</b> |         |                                                                      |             |
| 1                   | CON0001 | Consultation - Andrology                                             | 500.00      |
| 2                   | CON0002 | Consultation - Anesthesia                                            | 500.00      |
| 3                   | CON0003 | Consultation - Cardiology                                            | 500.00      |
| 4                   | CON0004 | Consultation- Chiropractory                                          | 500.00      |
| 5                   | CON0005 | Consultation - Dermatology                                           | 500.00      |
| 6                   | CON0006 | Dietitian Consultation - First Visit                                 | 350.00      |
| 7                   | CON0007 | Dietitian Consultation - 2nd & Subsequent Visit                      | 200.00      |
| 8                   | CON0008 | Consultation - Endocrinology                                         | 500.00      |
| 9                   | CON0009 | Consultation - ENT                                                   | 500.00      |
| 10                  | CON0010 | Consultation - Family Medicine                                       | 500.00      |
| 11                  | CON0011 | Consultation - Gastroenterology                                      | 500.00      |
| 12                  | CON0012 | Consultation - Gynecology                                            | 500.00      |
| 13                  | CON0013 | Consultation - Internal Medicine                                     | 500.00      |
| 14                  | CON0014 | Consultation - IVF                                                   | 600.00      |
| 15                  | CON0015 | Midwife Lactation Consultation                                       | 350.00      |
| 16                  | CON0016 | Consultation - Nephrology                                            | 500.00      |
| 17                  | CON0017 | Consultation - Neurology                                             | 500.00      |
| 18                  | CON0018 | Consultation - Obstetrics                                            | 500.00      |
| 19                  | CON0019 | Ophthalmology Consultation Fees                                      | 500.00      |
| 20                  | CON0020 | Orthopedic Consultation                                              | 500.00      |
| 21                  | CON0021 | Consultation - Paediatrics                                           | 500.00      |
| 22                  | CON0022 | Consultation - Podiatry                                              | 500.00      |
| 23                  | CON0023 | Consultation - Physical and Rehabilitation Medicine                  | 500.00      |
| 24                  | CON0024 | Psychiatric Consultation - Consultant                                | 500.00      |
| 25                  | CON0025 | Psychiatric Consultation - Specialist                                | 500.00      |

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| SR | CODE    | DESCRIPTION                                                   | PRICE (QAR) |
|----|---------|---------------------------------------------------------------|-------------|
| 26 | CON0026 | Psychotherapy Consultation                                    | 300.00      |
| 27 | CON0027 | Pulmonology Consultation                                      | 500.00      |
| 28 | CON0028 | Consultation - Rheumatology                                   | 500.00      |
| 29 | CON0029 | Consultation - Speech and Language Therapy                    | 500.00      |
| 30 | CON0030 | Consultation - Surgery                                        | 500.00      |
| 31 | CON0031 | Consultation - Urologist                                      | 500.00      |
| 32 | CON0032 | Visiting Physicians Consultation Fee                          | 500.00      |
| 33 | CON0033 | Consultation - Friday Clinic                                  | 500.00      |
| 34 | CON0034 | Follow-UP Consultation (Andrology)                            | 300.00      |
| 35 | CON0035 | Follow up Consultation - Anesthetic                           | 300.00      |
| 36 | CON0036 | Follow up Visit -Cardiology Clinic                            | 300.00      |
| 37 | CON0037 | Follow up Consultation - Chiropractory                        | 300.00      |
| 38 | CON0038 | Follow up Consultation - Dermatology                          | 300.00      |
| 39 | CON0039 | Follow up Consultation - Endocrinology                        | 300.00      |
| 40 | CON0040 | Follow up Consultation - ENT                                  | 300.00      |
| 41 | CON0041 | ENT Follow-up Visit (7-10 days)                               | 300.00      |
| 42 | CON0042 | Follow up Consultation - Family Medicine                      | 300.00      |
| 43 | CON0043 | Follow up Consultation - Gastroenterology                     | 300.00      |
| 44 | CON0044 | Follow-up - Gyn & Obstetrics                                  | 300.00      |
| 45 | CON0045 | Follow up Consultation - Internal Medicine                    | 300.00      |
| 46 | CON0046 | Follow up Consultation - IVF                                  | 350.00      |
| 47 | CON0047 | Midwife Lactation follow up                                   | 175.00      |
| 48 | CON0048 | Follow up Consultation - Nephrology                           | 300.00      |
| 49 | CON0049 | Follow-up Neurology consultation                              | 300.00      |
| 50 | CON0050 | Follow up Consultation - Obstetrics                           | 300.00      |
| 51 | CON0051 | Ophthalmology Follow up Consultation Fees                     | 300.00      |
| 52 | CON0052 | Orthopedic follow-up                                          | 300.00      |
| 53 | CON0053 | Follow up Consultation - Paediatrics                          | 300.00      |
| 54 | CON0054 | Follow up Consultation - Podiatry                             | 300.00      |
| 55 | CON0055 | Follow up Consultation - Physical and Rehabilitation Medicine | 300.00      |
| 56 | CON0056 | Psychiatric Follow-up Consultant                              | 300.00      |
| 57 | CON0057 | Psychiatric Follow-up Specialist                              | 300.00      |
| 58 | CON0058 | Follow up Consultation - Psychotherapy                        | 300.00      |
| 59 | CON0059 | Follow-Up Pulmonology Consultation                            | 300.00      |
| 60 | CON0060 | Follow-up Consultation - Rheumatology                         | 300.00      |
| 61 | CON0061 | Followup - Speech and Language Therapy                        | 400.00      |
| 62 | CON0062 | Follow up Consultation - Surgery                              | 300.00      |
| 63 | CON0063 | Follow-up - Urology                                           | 300.00      |
| 64 | CON0064 | Follow up Visit - Visiting doctors                            | 500.00      |
| 65 | CON0065 | Initial Emergency Services                                    | 500.00      |
| 66 | CON0066 | Clinical Psychology - Consultation & Follow-up                | 300.00      |
| 67 | CON0067 | In-patient consultations Fee - Admitting Doctor (Per Day)     | 500.00      |
| 68 | CON0068 | In-patient consultations Fee - 2nd Doctor (Per Day)           | 500.00      |
| 69 | CON0069 | Consultant Home Visit - Outside working hours                 | 3,000.00    |
| 70 | CON0070 | Doctor's Home Visit (1 Hour)                                  | 2,000.00    |
| 71 | CON0071 | Doctor's Home Visit (subsequent 1/2 Hour)                     | 1,000.00    |
| 72 | CON0072 | Specialized Doctor's Home Visit (1 Hour)                      | 3,000.00    |
| 73 | CON0073 | Specialized Doctor's Home Visit (subsequent 1/2 Hour)         | 1,500.00    |
| 74 | CON0074 | Doctor's Visit (Doctor accompanying guest abroad) - Per Day   | 8,000.00    |
| 75 | CON0075 | Immunization Consultation (brief)                             | 150.00      |
| 76 | CON0076 | Routine Travel Consultaion                                    | 300.00      |
| 77 | CON0077 | Comprehensive Travel Consultation                             | 500.00      |
| 78 | CON0078 | Post Travel Consultation                                      | 300.00      |
| 79 | CON0079 | Fitness Fly                                                   | 300.00      |

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| SR                                    | CODE     | DESCRIPTION                                            | PRICE (QAR) |
|---------------------------------------|----------|--------------------------------------------------------|-------------|
| 80                                    | CON0080  | In-patient 1st Rounding Fee - Ward                     | 500.00      |
| 81                                    | CON0081  | In-patient 2nd and Subsequent Rounding Fee - Ward      | 350.00      |
| 82                                    | CON0082  | In-patient 1st Rounding Fee - ICU / CCU                | 750.00      |
| 83                                    | CON0083  | In-patient 2nd and Subsequent Rounding Fee - ICU / CCU | 500.00      |
| 84                                    | CON0086  | Chiropractic treatment (1 session) - 40 minutes        | 400.00      |
| 85                                    | Followup | General Clinics - Follow Up Consultation               | 300.00      |
| 86                                    | CON0088  | Consultation - Hearing and Balance                     | 300.00      |
| 87                                    | CON0091  | Neurosurgeon Consultation                              | 500.00      |
| <b>Clinical Services / Procedures</b> |          |                                                        |             |
| 1                                     | REP0001  | Medical Report                                         | 100.00      |
| 2                                     | REP0002  | Detailed Medical report (Small)                        | 200.00      |
| 3                                     | REP0003  | Detailed Medical report (Medium)                       | 400.00      |
| 4                                     | REP0004  | Detailed Medical report (Large)                        | 800.00      |
| 5                                     | REP0005  | Vaccination Report- Duplicate                          | 100.00      |
| 6                                     | SRV0001  | Aero Chamber                                           | 70.00       |
| 7                                     | SRV0002  | Allergy Test                                           | 1,650.00    |
| 8                                     | SRV0004  | Bladder Catheterization                                | 140.00      |
| 9                                     | SRV0005  | Bladder Irrigation                                     | 200.00      |
| 10                                    | SRV0006  | Blood Transfusion Service                              | 400.00      |
| 11                                    | SRV0007  | Body Composition Analysis                              | 90.00       |
| 12                                    | SRV0009  | Catheter Removal                                       | 75.00       |
| 13                                    | SRV0010  | Catheterisation Urine                                  | 200.00      |
| 14                                    | SRV0011  | Cauterization of Umbilical Granuloma                   | 60.00       |
| 15                                    | SRV0019  | Colposcopic Examination                                | 640.00      |
| 16                                    | SRV0020  | Crash Cart (inclusive)                                 | 2,500.00    |
| 17                                    | SRV0021  | Cryotherapy for each wart / verruca /skin tag          | 150.00      |
| 18                                    | SRV0023  | Double phototherapy for 24 hrs                         | 770.00      |
| 19                                    | SRV0031  | Endometrial Sampling W/ Local Anaesthesia              | 310.00      |
| 20                                    | SRV0032  | Enema                                                  | 150.00      |
| 21                                    | SRV0034  | External CephalicVersion, W/WO Tocolysis               | 1,210.00    |
| 22                                    | SRV0035  | Extra Bed                                              | 400.00      |
| 23                                    | SRV0036  | FM Mylink Charger                                      | 130.00      |
| 24                                    | SRV0038  | Glucose - blood test                                   | 50.00       |
| 25                                    | SRV0039  | Hearing & Vision Screen                                | 280.00      |
| 26                                    | SRV0041  | Immunisation - Single                                  | 50.00       |
| 27                                    | SRV0042  | Infusion Pump                                          | 100.00      |
| 28                                    | SRV0043  | Injection - Intra Muscular                             | 50.00       |
| 29                                    | SRV0044  | Insertion Of Pessary                                   | 220.00      |
| 30                                    | SRV0045  | Intubations + Oxygen Therapy                           | 550.00      |
| 31                                    | SRV0050  | Lumbar Puncture                                        | 550.00      |
| 32                                    | SRV0052  | Observations - 2 to 4 hours                            | 200.00      |
| 33                                    | SRV0053  | Observations - up to 2 hours                           | 100.00      |
| 34                                    | SRV0054  | OPD/ Injection in the joint                            | 330.00      |
| 35                                    | SRV0055  | Oxygen Therapy                                         | 100.00      |
| 36                                    | SRV0056  | P.P.P - LL -Above Elbow                                | 1,100.00    |
| 37                                    | SRV0057  | P.P.P - LL -Below Elbow                                | 550.00      |
| 38                                    | SRV0058  | P.P.P - UL -Above Elbow                                | 550.00      |
| 39                                    | SRV0059  | P.P.P - UL -Below Elbow                                | 390.00      |
| 40                                    | SRV0060  | Peak Flow                                              | 75.00       |
| 41                                    | SRV0061  | Penile IC Injection for ED                             | 390.00      |
| 42                                    | SRV0062  | Post-Coital Test                                       | 170.00      |
| 43                                    | SRV0063  | PPM analysis / programming                             | 550.00      |
| 44                                    | SRV0065  | Priapism evacuation- L.A                               | 700.00      |
| 45                                    | SRV0066  | Priapism management - Medical                          | 550.00      |

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| SR | CODE    | DESCRIPTION                                                                      | PRICE (QAR) |
|----|---------|----------------------------------------------------------------------------------|-------------|
| 46 | SRV0067 | Procedure - Medium                                                               | 330.00      |
| 47 | SRV0068 | Procedure - Minor                                                                | 170.00      |
| 48 | SRV0071 | Sedation Fee                                                                     | 1,000.00    |
| 49 | SRV0073 | Single phototherapy for 24 hrs                                                   | 550.00      |
| 50 | SRV0074 | Skin Prick Test (up to 5 pricks)                                                 | 1,000.00    |
| 51 | SRV0075 | Suprapubic needle aspiration                                                     | 110.00      |
| 52 | SRV0076 | Suture Removal by doctor                                                         | 110.00      |
| 53 | SRV0077 | Travel fitness certificate                                                       | 40.00       |
| 54 | SRV0080 | Urine Pregnancy Test                                                             | 75.00       |
| 55 | SRV0081 | Urineanalysis - Simple                                                           | 50.00       |
| 56 | SRV0084 | Vulva Medication Application                                                     | 60.00       |
| 57 | SRV0085 | Vulval Lesion - Cauterisation/Removal W/ Local Anaesthesia                       | 310.00      |
| 58 | SRV0086 | Vulval Lesion - Cauterisation/Excision                                           | 170.00      |
| 59 | SRV0087 | Vulval Lesion Cauterisation/Excision W/ Local Anaesthesia                        | 310.00      |
| 60 | SRV0088 | Vulval Lesion - Cauterisation/Removal                                            | 170.00      |
| 61 | SRV0089 | Wound Inspection; Change of dressing(R.O.S)                                      | 250.00      |
| 62 | SRV0090 | Administration of I/V fluids to dehydrated kids                                  | 600.00      |
| 63 | SRV0091 | 1h-6h Admin of IV fluids to dehydrated kids                                      | 400.00      |
| 64 | SRV0092 | 6h-24h Admin of IV fluids to dehydrated kids                                     | 600.00      |
| 65 | SRV0093 | I/V Fluids + Ferrous Sulfate                                                     | 300.00      |
| 66 | SRV0094 | Injection - I.V Injection with fluid                                             | 75.00       |
| 67 | SRV0095 | Injection - Simply I.V Injection                                                 | 50.00       |
| 68 | SRV0098 | Canteen Service - IP -Breakfast                                                  | 20.00       |
| 69 | SRV0099 | Canteen Service - IP -Lunch                                                      | 50.00       |
| 70 | SRV0100 | Canteen Service - IP -Diner                                                      | 50.00       |
| 71 | SRV0101 | Canteen Service - IP-Miscellaneous                                               | 1.00        |
| 72 | SRV0106 | International Phone calls                                                        | 1.00        |
| 73 | SRV0107 | Health Card                                                                      | 50.00       |
| 74 | SRV0108 | Health Card - Below 18 yrs old                                                   | 25.00       |
| 75 | SRV0109 | MC - anti-HIV 1,2 group O + Chest X-ray                                          | 400.00      |
| 76 | SRV0110 | MC - anti-HIV 1,2 group O + Chest X-ray + Clinical Exam+ABO Group                | 650.00      |
| 77 | SRV0111 | MC - anti-HIV 1,2 group O + anti-HCVHBsAg                                        | 700.00      |
| 78 | SRV0112 | MC - anti-HIV 1,2 group O + anti-HCVHBsAg + Chest X-ray                          | 800.00      |
| 79 | SRV0113 | MC - anti-HIV 1,2 group O + anti-HCVHBsAg + Chest X-ray + Clinical Exam          | 1,100.00    |
| 80 | SRV0114 | MC - anti-HIV 1,2 group O + anti-HCVHBsAg + RPR + Chest X-ray                    | 900.00      |
| 81 | SRV0115 | MC - anti-HIV 1,2 group O + anti-HCVHBsAg + RPR + Chest X-ray + Clinical Exam    | 1,150.00    |
| 82 | SRV0116 | MC - anti-HIV 1,2 group O + anti-HCVHBsAg + RPR + Serum Creatinine + Chest X-ray | 950.00      |
| 83 | SRV0117 | MC-anti-HIV 1,2 grp O+anti-HCVHBsAg+RPR+Serum Creatinine+Chest X-ray+Clin Exm    | 1,250.00    |
| 84 | SRV0118 | Guest cash back                                                                  | 50.00       |
| 85 | SER1041 | Phlebotomy service, home visit                                                   | 500.00      |
| 86 | SER1042 | MC- Documentation Processing Fees below 15 yrs                                   | 150.00      |
| 87 | SER0108 | Home visit (1 hour) - Midwife                                                    | 350.00      |
| 88 | VCN0001 | Typhoid Vaccine (Typhim VI)                                                      | 150.00      |
| 89 | VCN0002 | Varicella Vaccine/(Chicken Pox )( Varilrix)                                      | 375.00      |
| 90 | VCN0003 | Anti D Immglbn (Human) 250 Mcg ( Phesogamma P)                                   | 750.00      |
| 91 | VCN0004 | Diphtheria & Tetanus Vac. Child Ads. (D.T)                                       | 100.00      |
| 92 | VCN0005 | Dipht & Tet. + Pert Vac Child - (Tetract-Hib)                                    | 150.00      |
| 93 | VCN0006 | Haemophilus Influenzae B (HIB) (ACT-HIB)                                         | 300.00      |
| 94 | VCN0007 | Hepatitis A Vaccine 1440 Adult (HAVRIX )                                         | 350.00      |
| 95 | VCN0008 | Hepatitis B Vaccine 10MCG/0.5ML PED. - (ENGERIX-B)                               | 150.00      |
| 96 | VCN0009 | Hepatitis B Vaccine 20MCG/ML ADULT - (ENGERIX-B)                                 | 150.00      |
| 97 | VCN0010 | Influenza Viral Vaccine (Fluarix)                                                | 150.00      |
| 98 | VCN0011 | M.M.R Vac. Live 0.5ML - (Priorix)                                                | 175.00      |
| 99 | VCN0012 | Pneumococcal Polysaccharide Vaccine                                              | 100.00      |

Director of Finance

Al-Ahli Hospital



المستشفى الأهلي  
AL-AHLI HOSPITAL

# AL-AHLI HOSPITAL PRICE LIST

Date: 12-Feb-17

| SR  | CODE    | DESCRIPTION                                                 | PRICE (QAR) |
|-----|---------|-------------------------------------------------------------|-------------|
| 100 | VCN0013 | Polio. Vac Live Oral (Sabin)                                | 100.00      |
| 101 | VCN0014 | Rabies Vac Inactiv.(Hdcv) 2.5U Sc                           | 175.00      |
| 102 | VCN0015 | Tetanus Vaccine Pref.Syringe 0.5ML - (Tetavax)              | 150.00      |
| 103 | VCN0016 | Tuberculin PPD 0.1ML                                        | 200.00      |
| 104 | VCN0017 | BCG Vaccine (0.05MG/0.1 ML Dose) 20 Dose AMP                | 100.00      |
| 105 | VCN0018 | Dipht & Tet. Adult Vac.( Td)                                | 100.00      |
| 106 | VCN0019 | Pneumococcal Heptavalent Conj. Vac.(Prevenar)               | 450.00      |
| 107 | VCN0020 | Yellow Fever Live Vaccine 0.5ML (STAMARIL)                  | 380.00      |
| 108 | VCN0021 | Diphtheria,Pertussis,Tetanus+HepatitisB+Hib (Penta Vaccine) | 250.00      |
| 109 | VCN0022 | MPSV4 - Meningococcal A,C,Y & W 10 Doses Vial MPSV4         | 200.00      |
| 110 | VCN0023 | Hepatitis A Paed. Vaccine (AVAXIM)                          | 300.00      |
| 111 | VCN0024 | Tetanus Immunoglobulin (Human) Vaccine                      | 200.00      |
| 112 | VCN0025 | ROTARIX (Rota virus vaccine) 1 ml per dose                  | 400.00      |
| 113 | VCN0026 | TWINRIX Vaccine                                             | 300.00      |
| 114 | VCN0027 | DTAP Vaccine                                                | 250.00      |
| 115 | VCN0028 | H1N1 Vaccine ( Pandemrix )                                  | 250.00      |
| 116 | VCN0029 | D.P.T+Hep+H.Inft+Polio. Vaccine ( Hexa )                    | 400.00      |
| 117 | VCN0030 | Japanese Encephalitis Single Dose                           | 800.00      |
| 118 | VCN0031 | Tick Borne Encephalitis Single Dose                         | 410.00      |
| 119 | VCN0032 | Meningococcal MeningitisA,C,Y & ??W Single Dose             | 210.00      |
| 120 | VCN0033 | Rabies vaccine single dose                                  | 410.00      |
| 121 | VCN0034 | Hepatitis A + Typoid Vaccine (hepatyrix) single dose        | 410.00      |
| 122 | VCN0035 | Cholera (Dukoral) Vaccine Single Dose                       | 300.00      |
| 123 | VCN0036 | Cervarix Vaccine                                            | 525.00      |
| 124 | VCN0037 | DTPa+Hib (Infanrix Hib) Vaccine                             | 300.00      |
| 125 | VCN0038 | H.P.V Vaccine                                               | 575.00      |
| 126 | VCN0039 | Gardasil Vaccine                                            | 750.00      |
| 127 | VCN0040 | Vaccination Package - South EastAsia                        | 2,070.00    |
| 128 | VCN0041 | Vaccination Package - Middle East                           | 1,070.00    |
| 129 | VCN0042 | Vaccination Package - Africa                                | 1,910.00    |
| 130 | VCN0043 | Vaccination Package - South America                         | 1,650.00    |
| 131 | VCN0044 | d.t. acellular pertussis VAC (dtap), ADULT (Single Dose)    | 182.00      |
| 132 | AVA0001 | Audio - Aviation Clinic                                     | 200.00      |
| 133 | AVA0002 | Canadian Certificate                                        | 200.00      |
| 134 | AVA0003 | Canadian Consultation - Med Exam w/ QCAA                    | 100.00      |
| 135 | AVA0004 | Canadian Consultation - Med Exam w/o QCAA                   | 250.00      |
| 136 | AVA0005 | FAA Consultation - Med Exam w/o QCAA                        | 250.00      |
| 137 | AVA0006 | FAA Certificate                                             | 200.00      |
| 138 | AVA0007 | FAA Consultation - Med Exam w/ QCAA                         | 100.00      |
| 139 | AVA0008 | Medical Report - Aviation Clinic                            | 250.00      |
| 140 | AVA0009 | QCAA Consultation - Med Exam                                | 250.00      |
| 141 | AVA0010 | QCAA Certificate                                            | 200.00      |

Mustafa El-Ahwal (MBA, FCA, ACCA)  
Director of Finance  
Al-Ahli Hospital

AL-AHLI HOSPITAL  
Finance Department



# QCHP

المجلس القطري للتخصصات الصحية  
Qatar Council for Healthcare Practitioners  
الخدمة الجيدة  
Fitness to Practice



I, the undersigned, declare that I will abide by the circular number (HQPSD 03/2016) as per PLC decision which has been taken in 18<sup>th</sup> November 2015 that all healthcare facilities (public / Private / Semi-Governmental) must display "Patient's Bill of Rights & Responsibilities" publications in both English and Arabic languages in each of their waiting areas, receptions of all clinics and/or other prominent places.

Hereby, I declare that I have received all the related publications (posters and booklets) and the facility will comply with the above mentioned circular and decision and the facility will take the full responsibility for violating the above mentioned/ the violation.

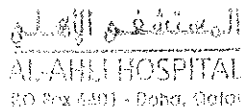
Name :



Name of the facility :

Position in the facility :

Signature:



Date:

أقر أنا الموقع أدناه بأنني قد اطلعت على التعميم رقم (HQPSD 03/2016) بناء على قرار اللجنة الدائمة للتراخيص الصادر بتاريخ 18 نوفمبر 2015 والمتعلق بإلزام كافة المنشآت الصحية (الحكومية - شبه الحكومية - الخاصة) بوضع ميثاق حقوق واجبات المريض باللغتين الإنجليزية والعربية في مكان بارز في مناطق انتظار المرضى والعيادات والأقسام الرئيسية بالمنشأة بالإضافة للمداخل والمخارج.

كما أقر بأنني قد استلمت كل المطبوعات الخاصة بالميثاق (بوسترات وكتيبات)، كما إن المنشأة تتعهد بتنفيذ كلاً من التعميم و القرار المذكورين أعلاه، حيث ستتحمل المنشأة كامل المسؤولية المترتبة على مخالفة ما جاء أعلاه.

الاسم : جمال صالح عبد الرحمن عبد الله

اسم المنشأة : مستشفى الأهلي

المهنة / الصفة بالمنشأة : نائب رئيس تنفيذي

التوقيع : [Signature]

التاريخ : 12/12/2016.

Copy /

- Undersigned.
- Original must be kept in Facility File, MOPH.

Attached: Copy of the policy for "Patients' bill of rights and responsibilities"

نسخة /

- للمتعبد.
- يحفظ الاصل في ملف المنشأة بقسم التراخيص بوزارة الصحة العامة.
- مرفق/ نسخة من سياسة تطبيق ميثاق حقوق واجبات المرضى.

تم استلام الطبيب (المعلقة بالساعة الساعة 12:00)   
 [Signature]