INSTITUTE OF NUCLEAR MEDICINE AND ALLIED SCIENCES, CHATTOGRAM
(Bangladesh Atomic Energy Commission)
সেবা আর মমতায় প্রযুক্তির উৎকর্ষতায়

All Services Rate List

Investigation	Department	Rate
BMD (Bone Mineral Density) Study	BMD (Bone Mineral Density)	2500.00
BMD Whole Body	BMD (Bone Mineral Density)	5000.00
Brain CT With reporting	CT Scan	2500.00
Brain CT Without Reporting	CT Scan	2000.00
Brain Perfusion CT With Reporting	CT Scan	3000.00
Brain Perfusion CT Without Reporting	CT Scan	2500.00
Cervical CT With Reporting	CT Scan	2500.00
Cervical CT Without Reporting	CT Scan	2000.00
Chest CT with reporting	CT Scan	2500.00
Chest CT without reporting	CT Scan	2500.00
CT Angio Abdomen With Reporting	CT Scan	4000.00
CT Angio Abdomen Without Reporting	CT Scan	3500.00
CT Angio Brain With Reporting	CT Scan	4000.00
CT Angio Brain Without Reporting	CT Scan	3500.00
CT Limb (Single) With Reporting	CT Scan	5000.00
CT Limb (Single) Without Reporting	CT Scan	4500.00
CT Reporting	CT Scan	500.00
Lower Abdomen CT with reporting	CT Scan	2000.00
Lower Abdomen CT without reporting	CT Scan	2500.00
Lumber CT With Reporting	CT Scan	3000.00
Lumber CT Without Reporting	CT Scan	2500.00
Non Contrast CT KUB With Reporting	CT Scan	2500.00
Non Contrast CT KUB Without Reporting	CT Scan	2000.00
Orbit/Sinus CT With Reporting	CT Scan	2500.00
Orbit/Sinus CT Without Reporting	CT Scan	2000.00
Other Parts CT With Reporting	CT Scan	3000.00
Other Parts CT Without Reporting	CT Scan	2500.00
Thoracic CT With Reporting	CT Scan	3000.00
Thoracic CT Without Reporting	CT Scan	2500.00
Upper Abdomen CT with reporting	CT Scan	2000.00
Upper Abdomen CT without reporting	CT Scan	2500.00

Investigation	Department	Rate
Whole Abdomen CT with reporting	CT Scan	4000.00
Whole Abdomen CT without reporting	CT Scan	4500.00
Whole Spine CT With Reporting	CT Scan	5000.00
Whole Spine CT Without Reporting	CT Scan	4500.00
3 Phase Bone Scan	Gamma Camera	800.00
Brain Scan (Tc-99m)	Gamma Camera	1000.00
Carcinoid Tumor Evaluation With Octreotide	Gamma Camera	20000.00
Cardiac MUGA	Gamma Camera	350.00
CSF Rhinorrhea Study	Gamma Camera	3000.00
DMSA - Renal Scan (Tc 99m)	Gamma Camera	30.00
DTPA - Captopril Gamma Camera Renogram (Tc 99m)	Gamma Camera	350.00
DTPA-Renogram and Serum Sample GFR (Tc 99m)	Gamma Camera	3000.00
DTPA-Renogram and Split Renal Function (Tc-99m)	Gamma Camera	1000.00
DTPA-Renogram With Camera GFR (Tc 99m)	Gamma Camera	3000.00
GIT Studies (Gastric Emptying, Oesophageal Reflux)	Gamma Camera	4000.00
Hepatobilliary Scan (Tc 99m)	Gamma Camera	3000.00
Hysterosalphingo Scintigraphy	Gamma Camera	3000.00
Kidney Scan (DTPA)	Gamma Camera	1000.00
Liver Perfusion/Flow	Gamma Camera	3000.00
Liver Scan (Tc 99m)	Gamma Camera	3000.00
Liver Spleen Scan (Tc 99m)	Gamma Camera	3000.00
Lymphoscintigraphy For Lymphatic Drainage Evaluation	Gamma Camera	4000.00
Lymphoscintigraphy For Sentinel LM (Tc 99m)	Gamma Camera	4000.00
Meckels Diverticulum Scan	Gamma Camera	3000.00
MIBG Scan	Gamma Camera	20000.00
Myocardial Perfusion Scan (MPI)	Gamma Camera	7000.00
Onchological Study MIBI, Thallium or Gallium	Gamma Camera	20000.00
RBC - Scan for Hemangioma	Gamma Camera	3000.00
Salivary Gland Scan	Gamma Camera	3000.00
Scan for Gastro - Intestinal Bleeding (RBC)	Gamma Camera	3000.00
Single Spot Bone Scan	Gamma Camera	3000.00

Investigation	Department	Rate
SPECT HMPAO Cerebral Perfusion Imaging (Tc99m)	Gamma Camera	4000.00
SPECT MIBI parathyroid imaging	Gamma Camera	4000.00
SPECT Myocardial perfusion (rest)	Gamma Camera	4000.00
SPECT Myocardial perfusion (stress+ rest)	Gamma Camera	10000.00
SPECT pyp Cardiac Scan	Gamma Camera	5000.00
SPECT: Bone Scan	Gamma Camera	350.00
SPECT: Kidney Scan	Gamma Camera	4000.00
SPECT: Liver Scan	Gamma Camera	4000.00
SPECT: Lung Perfusion	Gamma Camera	4000.00
SPECT: Lung VQ Scan	Gamma Camera	4000.00
SPECT-CT Brain Scan	Gamma Camera	5000.00
SPECT-CT Brain Tumor Recurrence	Gamma Camera	5000.00
SPECT-CT Liver Spleen Scan	Gamma Camera	5000.00
SPECT-CT Lung VQ Scan	Gamma Camera	5000.00
SPECT-CT Other	Gamma Camera	5000.00
SPECT-CT Parathyroid	Gamma Camera	5000.00
SPECT-CT Salivary Scan	Gamma Camera	5000.00
SPECT-CT Whole body bone scan	Gamma Camera	5000.00
Tc 99m PSMA	Gamma Camera	8000.00
Testicular Scan	Gamma Camera	3000.00
Thyroid Scan (Tc-99m)	Gamma Camera	500.00
V - P Shaunt Patency Study	Gamma Camera	3000.00
Vesicoureteric Reflux Study	Gamma Camera	3000.00
All tests (T3+ T4+ FT3+ FT4+ TSH+ FSH+ LH+ PRL+ Vit-D+ PTH+ PRL+ Tg+ TSTO+Prog+ Estro	In-Vitro Lab (Hormone, Cancer Marker & other's)	20000.00
Anti Thyroid Ab +Anti Thyroid Microsomal Ab	In-Vitro Lab (Hormone, Cancer Marker & other's)	1500.00
Anti Thyroid Ab +Anti Thyroid Microsomal Ab+ Anti TPO Ab	In-Vitro Lab (Hormone, Cancer Marker & other's)	2000.00
Anti Thyroid Microsomal Antibody	In-Vitro Lab (Hormone, Cancer Marker & other's)	700.00
CA 19-9 (Cancer Marker)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1200.00
CA-125: Cancer Marker	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
Calcitonin	In-Vitro Lab (Hormone, Cancer Marker & other's)	700.00
CEA: Carcinoembryonic antigen; Cancer Marker	In-Vitro Lab (Hormone, Cancer Marker & other's)	800.00

Investigation	Department	Rate
Cortisol	In-Vitro Lab (Hormone, Cancer Marker & other's)	700.00
Estradiol	In-Vitro Lab (Hormone, Cancer Marker & other's)	700.00
Estrogen	In-Vitro Lab (Hormone, Cancer Marker & other's)	700.00
Estrogen + Testosterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
Estrogen +Progesterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
Estrogen +Progesterone+ Testosterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	1500.00
Follicule Stimulating Hormone (FSH)	In-Vitro Lab (Hormone, Cancer Marker & other's)	700.00
Follow-up/TSH+Tg Tg Ab+Cal	In-Vitro Lab (Hormone, Cancer Marker & other's)	500.00
Free T3 (FT3)/ Triiodothyronine (T3)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1200.00
Free T4 (FT4)/ Thyroxine (T4)	In-Vitro Lab (Hormone, Cancer Marker & other's)	600.00
FSH + LH+ PRL+ Testosterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	1800.00
FSH + LH+ PRL+ Estrogen	In-Vitro Lab (Hormone, Cancer Marker & other's)	1800.00
FSH + LH+ PRL+ Estrogen+ Testosterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	2200.00
FSH + LH+ PRL+ Progesterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	1800.00
FSH + LH+ PRL+ Progesterone+ Estrogen	In-Vitro Lab (Hormone, Cancer Marker & other's)	2200.00
FSH + LH+ PRL+ Progesterone+ Estrogen+ Testosterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	2700.00
FSH + LH+ PRL+ Progesterone+ Testosterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	2200.00
FSH + PRL+ LH	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
FT3 + FT4 + TSH (Free T3, Free T4, TSH)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1100.00
FT3 + FT4 + TSH + Tg (Only for NM follow-up patients)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1200.00
FT3 + TSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	800.00
FT3 + TSH (Only for NM follow-up patients)	In-Vitro Lab (Hormone, Cancer Marker & other's)	500.00
FT3+ FT4+TSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	350.00
FT3+FT4+TSH+TG	In-Vitro Lab (Hormone, Cancer Marker & other's)	800.00
FT4 + TSH (Only for NM follow-up patients)	In-Vitro Lab (Hormone, Cancer Marker & other's)	500.00
FT4 + TSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	800.00
GH (Growth Hormone)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
LH + FSH + PRL Package (General)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
LH+ FSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
LH+ PRL	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
Other markers (Not mentioned)	In-Vitro Lab (Hormone, Cancer Marker & other's)	800.00
PRL (Prolactin)	In-Vitro Lab (Hormone, Cancer Marker & other's)	500.00
Progesterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	500.00

Investigation	Department	Rate
Progesterone+ Testosterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
PTH (Parathyroid Hormone)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
Serum PSA (Prostate Specific Antigen): Cancer Marker	In-Vitro Lab (Hormone, Cancer Marker & other's)	800.00
Serum sample GFR	In-Vitro Lab (Hormone, Cancer Marker & other's)	1400.00
T3 + T4 + TSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	1100.00
T3+ TSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
T3+ TSH (Only for therapy follow up patients)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
T4+ TSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
Testosterone	In-Vitro Lab (Hormone, Cancer Marker & other's)	600.00
Thyroglobulin Antibody: Tg Antibody(Tg Ab)	In-Vitro Lab (Hormone, Cancer Marker & other's)	700.00
Thyroid Peroxidase Antibody: TPO Antibody (TPO-Ab)	In-Vitro Lab (Hormone, Cancer Marker & other's)	700.00
Thyroid scan+ HRUS of thyroid+ Serum FT3, FT4, TSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	2200.00
Thyroid scan+ HRUS of thyroid+ Serum T3, T4, TSH	In-Vitro Lab (Hormone, Cancer Marker & other's)	2200.00
Thyroid Stimulating Hormone (TSH)	In-Vitro Lab (Hormone, Cancer Marker & other's)	500.00
Thyroid Stimulating Immunoglobulin(TSI)/ Thyroid Stimulating Hormone receptor Antibody (TSHR-Ab/TRAb)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
TSH + TG (Only for NM follow-up patients)	In-Vitro Lab (Hormone, Cancer Marker & other's)	500.00
TSH Receptor Auto Ab	In-Vitro Lab (Hormone, Cancer Marker & other's)	800.00
TSI+ Tg (Consultation & Follow-up visit)	In-Vitro Lab (Hormone, Cancer Marker & other's)	1000.00
Vitamin D (Blood sample)	In-Vitro Lab (Hormone, Cancer Marker & other's)	2000.00
β-hCG: Cancer Marker	In-Vitro Lab (Hormone, Cancer Marker & other's)	800.00
Beta Radiation of Pterygium (Post Operative)	Miscellaneous Services	800.00
Beta Radiation of SCC (Post Operative)	Miscellaneous Services	800.00
Book Charge	Radio-iodine Therapy Unit	100.00
Free T4 (FT4)/ Thyroxine (T4)	Radio-iodine Therapy Unit	600.00
Initial assessment for RA 1-131 Therapy	Radio-iodine Therapy Unit	350.00
Post-operative thyroid ablation with I-131 for differentiated thyroid Cancer (100 mCi)	Radio-iodine Therapy Unit	5000.00
Post-operative thyroid ablation with I-131 for differentiated thyroid cancer (75-mCi)	Radio-iodine Therapy Unit	8000.00
Post-operative thyroid ablation with I-131 for differentiated thyroid Cancer 150 mCi	Radio-iodine Therapy Unit	15000.00

Investigation	Department	Rate
Post-operative thyroid ablation with I-131 for differentiated thyroid Cancer 200mCi	Radio-iodine Therapy Unit	50.00
Post-operative thyroid ablation with I-131 for differentiated thyroid Cancer 30 mCi	Radio-iodine Therapy Unit	3500.00
Post-operative thyroid ablation with I-131 for differentiated thyroid Cancer 50 mCi	Radio-iodine Therapy Unit	6000.00
Radioiodine treatment for grave's disease, Toxic thyroid nodule and Multinodular toxic goiter	Radio-iodine Therapy Unit	2000.00
T4+ TSH (Only for therapy follow up patients)	Radio-iodine Therapy Unit	1000.00
Tg	Radio-iodine Therapy Unit	700.00
Consultation & Follow-up visit at thyroid division	Thyroid	200.00
Consultation for radio-iodine therapy (First Visit)	Thyroid	200.00
Follow-up Care per visit	Thyroid	300.00
HRUS of thyroid	Thyroid	400.00
HRUS of thyroid + Serum FT3,FT4,TSH	Thyroid	1300.00
HRUS of thyroid + Serum T3,T4,TSH	Thyroid	1300.00
I-131 Thyroid Scan	Thyroid	1000.00
Neonatal Hypothyroid screening Filter Paper TSH	Thyroid	500.00
Thyroid Scan (Tc 99m)	Thyroid	700.00
Thyroid scan + HRUS of thyroid + Serum FT3, FT4, TSH	Thyroid	1400.00
Thyroid scan + HRUS of thyroid + Serum T3,T4,TSH	Thyroid	1400.00
Thyroid scan + Serum FT3, FT4, TSH	Thyroid	1400.00
Thyroid scan + Serum T3,T4,TSH	Thyroid	1300.00
Thyroid Scan + Thyroid Uptake Study	Thyroid	1400.00
Thyroid scan + Uptake + HRUS of thyroid + Serum FT3, FT4, TSH	Thyroid	2500.00
Thyroid scan + Uptake + HRUS of thyroid + Serum T3,T4, TSH	Thyroid	1600.00
Thyroid scan + Uptake + Serum FT3,FT4, TSH	Thyroid	1400.00
Thyroid uptake study	Thyroid	400.00
USG of Neck	Thyroid	400.00
Whole Body I131 Scan/ LDS	Thyroid	2000.00
3-D evaluation of fetal congenital anomaly	Ultrasound	1000.00

Investigation	Department	Rate
3D evaluation of fetal face	Ultrasound	1500.00
3D multi planner evaluation of abdominal mass	Ultrasound	2000.00
3D multi planner evaluation of adnexal mass	Ultrasound	2000.00
3D multi planner evaluation of uterine mass/ anomaly	Ultrasound	2000.00
4D evaluation of fetus in early pregnancy	Ultrasound	2000.00
Both lower limb Vessels (Color Doppler)	Ultrasound	1200.00
Doppler evaluation of abdominal aorta	Ultrasound	1000.00
Doppler evaluation of abdominal tumor	Ultrasound	1200.00
Doppler evaluation of all limbs	Ultrasound	2000.00
Doppler evaluation of AVM	Ultrasound	1000.00
Doppler evaluation of carotid & vertebral arteries	Ultrasound	1500.00
Doppler evaluation of cirrhosis & portal hypertension	Ultrasound	1200.00
Doppler evaluation of ectopic pregnancy	Ultrasound	1000.00
Doppler evaluation of endocavitary-TRUS	Ultrasound	1500.00
Doppler evaluation of endocavitary-TVS	Ultrasound	1500.00
Doppler evaluation of fetal echo	Ultrasound	1500.00
Doppler evaluation of hemangioma	Ultrasound	1000.00
Doppler evaluation of lower limb vessels	Ultrasound	700.00
Doppler evaluation of penis	Ultrasound	1500.00
Doppler evaluation of peripheral mass	Ultrasound	1200.00
Doppler evaluation of renal arteries	Ultrasound	1500.00
Doppler evaluation of Scrotum	Ultrasound	1000.00
Doppler evaluation of Single limb vessel for dialysis fistula channel	Ultrasound	1000.00
Doppler evaluation of transplant kidney	Ultrasound	1500.00
Doppler evaluation of upper limb vessels	Ultrasound	2000.00
Doppler evaluation of uterus & adnexa	Ultrasound	1000.00
Doppler evaluation of varicocele	Ultrasound	1000.00
Doppler obstetric (Pregnancy, Fetal Doppler Velocimetry)	Ultrasound	1500.00
Duplex evaluation of carotid & Vertebral arteries	Ultrasound	1000.00
Duplex evaluation of cirrhosis & portal hyportonsion	Ultrasound	1000.00

Investigation	Department	Rate
Duplex evaluation of renal artery/transplant kidney	Ultrasound	1200.00
Elastoscan: Breast	Ultrasound	2000.00
Elastoscan: Other	Ultrasound	2000.00
Elastoscan: Thyroid	Ultrasound	2000.00
Elastoscan: Thyroid/Breast/Other	Ultrasound	1000.00
Endocavitary color Doppler (TVS/TRUS)	Ultrasound	1200.00
Endocavity Sonography- TRUS	Ultrasound	1000.00
Endocavity Sonography- TVS	Ultrasound	1000.00
Fibroscan	Ultrasound	1500.00
HRUS of Brain	Ultrasound	600.00
HRUS of breast	Ultrasound	400.00
HRUS of breast & Axilla	Ultrasound	700.00
HRUS of Eye Ball and Orbit (Both eyes)	Ultrasound	600.00
HRUS of Eye Ball and Orbit (One eyes)	Ultrasound	500.00
HRUS of IHPS (Infant hypertropic pyloric stenosis)	Ultrasound	600.00
HRUS of Joint	Ultrasound	800.00
HRUS of local part (Chest)	Ultrasound	600.00
HRUS of local part (Neck)	Ultrasound	600.00
HRUS of local part (Superficial organ etc)	Ultrasound	600.00
HRUS of Muscle	Ultrasound	800.00
HRUS of pediatric brain and ventricles	Ultrasound	400.00
HRUS of Perietal mass	Ultrasound	600.00
HRUS of psos abscess (N/A)	Ultrasound	600.00
HRUS of Scrotum and Testis	Ultrasound	800.00
HRUS of Thyroid	Ultrasound	300.00
Obstetric Duplex (Pregancy, Fetal velocimetry/Fetal Echo)	Ultrasound	1000.00
Single lower limb vessel	Ultrasound	1500.00
Single upper limb vessel	Ultrasound	1500.00
USG guided Aspiration	Ultrasound	800.00
USG Guided Ethanol Injection	Ultrasound	600.00
USG guided FNAC	Ultrasound	600.00
USG of Appendix (N/A)	Ultrasound	600.00

Investigation	Department	Rate
USG of Biophysical Profile	Ultrasound	1200.00
USG of Chest	Ultrasound	500.00
USG of Fetal condition	Ultrasound	400.00
USG of Hepatobiliary System (HBS), Pancreas, Spleen	Ultrasound	300.00
USG of KUB with PVR	Ultrasound	300.00
USG of KUB, Prost, MCC, PVR	Ultrasound	400.00
USG of KUB, Uterus & Adnexa, MCC, PVR	Ultrasound	500.00
USG of Lower abdomen	Ultrasound	300.00
USG of Pregnancy Profile	Ultrasound	300.00
USG of Pregnancy profile with anomaly scan	Ultrasound	1200.00
USG of Prostate	Ultrasound	400.00
USG of Renal System (KUB)	Ultrasound	400.00
USG of Twin Pregnancy	Ultrasound	600.00
USG of Twin Pregnancy (Anomaly)	Ultrasound	1500.00
USG of Two system (HBS & KUB)	Ultrasound	400.00
USG of Two Systems (HBS & LA)	Ultrasound	500.00
USG of Two systems (KUB & LA)	Ultrasound	500.00
USG of Upper abdomen	Ultrasound	300.00
USG of Urinary System	Ultrasound	400.00
USG of Uterus and Adnexa	Ultrasound	400.00
USG of Whole Abdomen	Ultrasound	450.00
Vascular/ Peripheral Colour Doppler	Ultrasound	1000.00