

<u>DETAILS OF AILMENT COVERED/NOT COVERED</u>	
<u>1. GENERAL SURGERY</u>	
<u>AILMENT COVERED</u> a) Perforated peptic ulcer b) Acute Peritonitis c) Acute Pancreatitis d) Acute Appendicitis (Laparoscopic Appendicectomy) /Open Surgery e) Cholecystitis and gall stone removal (Laparoscopic Cholecycetectomy)/Open Surgery f) Acute intestinal obstruction g) Acute intussusceptions h) gangrene Intestine i) Major Organ transplants	<u>AILMENT NOT COVERED</u> a) Viral Hepatitis b) Liver Abscess c) T.B. Liver d) Cirrhosis Liver e) Amoebiasis f) Gastritis g) Gastroenteritis h) Peptic Ulcer
<u>2. ONCOLOGY</u>	
<u>AILMENT COVERED</u> a) All Malignant tumor requiring – Cancer Surgery, Chemotherapy, Radiotherapy and supply of Blood and Platelets b) PET Scan for completed Chemo/Radiotherapy for detecting residual lesion c) Any tumour requiring surgery	<u>AILMENT NOT COVERED</u> -
<u>3. NEPHROLOTY & UROLOGY</u>	
<u>AILMENT COVERED</u> a) Renal Failure requiring Acute and chronic Dialysis b) CAPD, Renal Transplantation c) Traumatic rupture – Ureter, Bladder , Urethra, Renal Calculus _ Lithotripsy, ESWL, Open Procedure, PCNL d) Ureteric Calculus e) Bladder Calculus f) Nephrectomy (Removal of Kidney) g) Renal Angiogram followed by stenting/Renal Angioplasty h) Dialysis and monthly medicines except nutrition supplements & Vitamins are covered for all Haemodialysis Patients on OP basis i) Any operative procedures	<u>AILMENT NOT COVERED</u> a) Hydronephrosis b) Pyelonephritis c) Incontinence of urine d) Urethra stricture e) Phimosiis f) Circumcision
<u>4. ORTHO</u>	
<u>AILMENT COVERED</u> a) Open reduction & Fixation of fracture b) Management of Compound & commuted fracture c) Acute post-traumatic joint replacement d) Laminectomy, Discectomy for PIVD e) Amputations in accidents or in any other Pathological conditions f) Major Organ transplant g) Any operative procedures	<u>AILMENT NOT COVERED</u> a) Rheumatoid Arthritis b) Ankylosing Spondylitis c) Osteoarthritis d) Osteomyelitis e) Suppurative Arthritis f) TKR/THR of Osteoarthritis/Rheumatoid Arthritis

5. Vascular Surgery

<u>Ailment covered</u>	<u>Ailment not covered</u>
a) Aneurysm (only if Surgery indicated by Arteriography) b) Acquire Arteriovenous fistula (Post Traumatic) c) Carotid Angiogram followed by stenting d) Vascular stents, other than above-Stent cost not more than that of invoice or ₹50,000/- whichever is less e) Embolism & Thrombosis	a) Arteriovenous fistula (Congenital)-Medical Management

6. ENT

<u>Ailment covered</u>	<u>Ailment not covered</u>
a) Foreign Body Removal Larynx and lower down b) Cochlear implant (Post Traumatic) c) Septoplasty d) FESS (Functional Endoscopic Sinus Surgery) e) Tympanoplasty f) Mastoid exploration g) Hearing aid bilateral for children deaf & dumb under the age of 3 years upto ₹20,000/- as per CGHS Rate	a) Any Inflammation & infection-Medical Management

7. Cardiology

<u>Ailment covered</u>	<u>Ailment not covered</u>
a) Angioplasty with stent implant (Stent cost not to exceed ₹50,000/- each) excess cost to be born by the employee and be paid to the Hospital directly b) Management of MI c) Angiogram perse (inpatient only) d) Drug Eluting Stent a) only for Osteal/Proximal LAD Lesions b) instent Stenosis c) Stenting of Restenotic lesion (CAG&PTCA CD with software to play the CD/VCD) <u>cost restricted to that of CGHS rates of stent from Time to time</u> e) CT Angio-subject to approval by Medical Advisor on case to case basis	-

8. CTS

<u>Ailment covered</u>	<u>Ailment not covered</u>
a) congenital heart disease- Cyanotic and Acyanotic requiring Surgey b) Valvular disease-closed Valvotomy Ballon Valvuloplasty c) Valve replacement d) Ischemic heart disease (CABG) e) Pneumonectomy and Haemothorax (post Traumatic)/of any cause f) Disease of lung requiring Lobectomy or pneumonectomy g) Traumatic Diaphragmatic Hernia h) All thoracic Surgeries including lobectomy	a) Pleural Effusion –Medical Management

9. DENTAL	
<u>Ailment covered</u>	<u>Ailment not covered</u>
a) Malignant Tumor	
10. EYE /OPHTHALMOLOGY	
<u>AILMENT COVERED</u>	
<ul style="list-style-type: none"> a. Corneal Transplant (Post-traumatic) b. Foreign body Removal c. Burns – Chemical and Thermal d. Blast injury-Blow out-Fracture, Laceration e. Cataract Surgery / Phaco emulsion lens cost restricted to Rs.1,000/- 	
11 NEUROLOGY / NEURO SURGERY	
<u>AILMENT COVERED</u>	<u>AILMENT NOT COVERED</u>
<ul style="list-style-type: none"> a. Head injury, Acute Extradural , Subdural Haematoma b. Haemorrhage, Cerebral concussion, contusion Laceration c. Spinal Cord injury d. Fracture, Dislocation sprint e. Post Traumatic (acute) Peripheral Nerve injury f. Acute CVA requiring –Angio, Stenting, Thrombolysis or Management of all CVA's is restricted to 7 days admission g. Anti- coagulant therapy and ventilator support h. Laminectomy / Discectomy 	<ul style="list-style-type: none"> a. Intra Cranial Abscess- Medical Management b. Cranial Nerve Palsy-Medical Management
12 CONGENITAL DISEASE	
<u>AILMENT COVERED</u>	<u>AILMENT NOT COVERED –Medical Management</u>
<ul style="list-style-type: none"> a. Congenital Diaphragmatic Hernia b. Cerebral palsy (only if surgical intervention required) c. Tracheo Esophageal Fistula d. Anorectal Anomalies 	<ul style="list-style-type: none"> a. Congenital Dislocation of Hip, Club Foot, Syndactyly of webbed finger b. Osteogenesis imperfecta, Congenital Torticollis, Scoliosis, c. Meningomyelocele. Hydrocephalus, poliomyelitis, Congenital Hernia d. Encephalocele, Spina Bifida, Cleft Lip & Palate, Pyloric Stenosis e. Congenital abnormalities of kidney.
13. GENERAL	
<u>AILMENT COVERED</u>	<u>AILMENT NOT COVERED</u>
<ul style="list-style-type: none"> a. Neonatal resuscitate /Asphxia Jaundice b. Any Surgical / Medical condition requiring Ventilator support or intensive care c. Any Trauma / Accident requiring in-patient treatment d. Any kind of poisoning e. Major Abdominal conditions like pancreatitis Cholecystitis f. Human immunoglobulin Therapy (GBS) and Factor VIII for Haemophilia, Thalassemia, 	<ul style="list-style-type: none"> a. Disease of Muscle, Tendon and Fascia b. Disease relating to or arising out of Malnutrition c. Any Endocrinal or hormonal disorder d. Management of Diabetes, Goiter e. Any Skin disorder f. Plastic Surgery not covered unless reconstruction surgery (post trauma) on duty only for the employees.

Haemophilias & idiopathic Thrombocytopenia purpura (ITP) on the advise of Neurologist or physician Surgeon.	
<u>14.OBSTETRICS & GYNECOLOGY</u>	
<u>AILMENT COVERED</u>	<u>AILMENT NOT COVERED</u>
a) Ectopic Pregnancy b) Antepartum Hemorrhage c) Pregnancy Induced hypertension d) Hysterectomy e) Deliveries f) Tubectomy (Laparoscopic/Open Surgery)	a) Any other disease related to Obstetrics/Gynecology, which requires only medical management b) Deliveries (with 2 living children)
<u>CT SCAN & ANGIOGRAMS IS COVERED</u>	
Note: In all cases of implants the hospital has to furnish the following particulars in support of their bills a) Particulars of company supplying the prosthetics b) Machine No.,Batch No. & date of manufacture of the item and date of expiry, if any c) Copy of supplier's bill d) Certificate if implantation/supply of prosthetics by the specialist of the hospital who actually implanted indicating i) Name of the patient-Sex, Age ii) Particulars of the procedure iii) Date of implantation e) Certificate of the specialist on supplier's bill reg. d) above and that the cost of the item is reasonable consistent with the quality f) Outer package of implants-Original is a must for clearing the bills	

Note:-

However, suggestions are also invited for inclusion or exclusion of the diseases for incorporation in the scheme