## **2017** PRICE LIST

Please note that the hospital prices listed here do not include doctor's fees. Physicians bill their charges separately. Contact information is listed below for some of the commonly billed physician charges associated with hospital services. For any questions about the information listed here, please call 419-891-8059.

For more information, please contact the following:

Southwest Anesthesia 419-897-8370 Services, Inc.

Medication Emergency 419-893-5968 Treatment Corporation (METCO)

Associated Pathologists 800-383-1656
Toledo Radiological Associates 800-714-5935
Sound Physicians 330-493-4443



ROOM RATES	
Medical/Surgical, Semiprivate	\$1,4
Private Room	\$1,4
INTENSIVE CARE CENTER	
Level 1	\$2,9
Level 2	\$1,9
Cardiac Care	\$1,9
CARDIOVASCULAR UNIT	
Level 1	\$7,8
Level 2	\$2,9
OBSTETRICS	
LDRP	\$1,8
Nursery	\$1,4
EMERGENCY	
Level 1	\$1
Level 2	\$3
Level 3	\$5
Level 4	\$9
Level 5	\$1,3
Critical Care, 30 to 74 minutes	\$2,1
SURGERY	
General/MAC Anesthesia, first 15 minutes	\$2,8
additional 15 minutes	\$1,4
Moderate Sedation, first 15 minutes	\$1,7
additional 15 minutes	\$8
Local Anesthesia, first 15 minutes	\$1,1
additional 15 minutes	\$5
Open Heart, first 15 minutes	\$4,3
additional 15 minutes	\$2,1

OB DELIVERY	
Vaginal Delivery	\$3,613
Cesarean Section	\$5,544
Labor Room, up to 4 hours	\$1,201
4 to 12 hours	\$1,664
More than 12 hours	\$2,136
CARDIOLOGY	
EKG	\$251
Echocardiography, Complete without Contrast	\$1,449
OTHER SERVICES	
Medical Nutrition Therapy, each 15 minutes	\$56
PET SCAN	
Skull to Thigh	\$5,261
RADIOLOGY	
Chest, 1 view	\$204
Chest, 2 views	\$261
Mammography Screening, Bilateral with CAD	\$301
Lumbar Spine, 2 to 3 views	\$316
Bone Density/DEXA Scan	\$429
CT SCAN	
Abdomen and Pelvis with Contrast	\$2,598
Brain without Contrast	\$1,020
Cerfical Spine without Contrast	\$1,107
Thorax without Contrast	\$1,061
MRI	
Lumbar Spine without Contrast	\$2,346
Brain without Contrast	\$2,346

ULTRASOUND	
Abdomen, Single Organ	\$806
RESPIRATORY THERAPY	
Blood Gas, Arterial	\$87
Inhalation Treatment	\$235
Pulse Oximetry	\$59
Percussion/Vibration	\$95
Arterial Puncture	\$58
Ventilator, Subesquent Day	\$1,450
PHYSICAL/OCCUPATIONAL THERAPY	
Therapeutic Exercise, each 15 minutes	\$113
Manual Therapy, each 15 minutes	\$132
Cardiac Rehab with ECG, per session	\$134
Gait Training	\$90
Physical Therapy Evaluation	\$262
Therapeutic Activity, each 15 minutes	\$118
Electric Stimulation, Unattended, each 15 minutes	\$72
Occupational Therapy, Evaluation up to 30 minutes	\$221
PT Ultrasound, each 15 minutes	\$96

LABORATORY	
Allergen-specific IgE	\$24
ALT	\$25
Amylase	\$26
Antibody Screen	\$86
AST	\$24
Blood Draw (Venipuncture)	\$10
Blood Type, ABO	\$152
Blood Type RH	\$152
BUN	\$18
C-reactive Protein	\$24
Calcium	\$62
CBC with Automated Differential	\$30
CBC without Differential	\$29

Cell Marker, Additional	\$88
Chemistry Panel, Basic	\$33
Chemistry Panel, Comprehensive	\$48
CPK, MB Fraction	\$41
CPK, Total	\$30
Creatinine	\$24
Creatinine, Other Source	\$24
Crossmatch Spin	\$375
Culture, CSF	\$39
Culture, Aerobic	\$37
Culture, Screening	\$25
Culture, Blood	\$47
Electrolytes	\$20
Glucose	\$18
Gram Stain	\$19

GYN, Automated Diagnostic	\$9
Hematocrit	\$1
Hemoglobin A1C	\$4
Hepatic Function/Liver Panel	\$2
Immunocytochemistry EA AB	\$48
Iron	\$2
Iron Binding	\$4
Lactic Acid	\$4
Lipase	\$3
Lipid Profile	\$5
Magnesium	\$2
Natriuretic Peptide	\$13
Phosphorus	\$1
Platelet Count	\$1
Potassium	\$2

Protime (INR)	\$18
PSA	\$7
PTT (APTT)	\$2!
Sed Rate, Automated	\$13
Surgical Path Level IV	\$410
T4 Free	\$4
Troponin	\$44
TSH	\$72
Urinalysis	\$10
Urinalysis, Automated with Microscopy	\$1!
Urine, Culture	\$3
Urine, Creatinine, Random	\$24
Urine, Pregnancy	\$29
Vitamin B-12	\$69
Vitamin D	\$12