Charges for Common Procedures as of October 2018

UPPER CHESAPEAKE MEDICAL CENTER

LABORATORY		RADIOLOGY	
	Estimated		Estimated
Procedure	Charge	Procedure	Charge
Basic Metabolic Panel	\$30	X-Ray Chest Complete 2+ Views	\$71
Bilirubin Direct	16	X-Ray Elbow 3+ Views	85
Bilirubin Total Neonatal	16	X-Ray Hip 2+ Views	113
CBC	22	X-Ray Knee 3 Views	99
CBC with Auto Diff	49	Cat Scan Abdomen with & without Contrast	189
Comprehensive Metabolic Panel	41	Cat Scan Cervical-Spine without Contrast	129
C-Reactive Protein	41	Cat Scan Head with Contrast	105
Glucose	11	Cat Scan Pelvis with Contrast	164
Glycohemoglobin (HGB A1C)	54	Ultrasound - Breast Unilateral Complete	282
HCG Qualitative	27	MRI Abdomen with & without Contrast	806
Hepatic Function Panel	30	MRI Brain with & without Contrast	319
Lipid Panel	51	MRI Breast with & without Contrast Bilateral	930
Magnesium	16	MRI Chest with & without Contrast	952
Microalbumin Urine Quantitative	41	MRI Cervical-Spine with & without Contrast	537
Misc Urinalysis	27	MRI Lumbar-Spine with Contrast	473
Partial Thromboplastin (APPT)	22	MRI Orbit/Face/Neck with & without Contrast	633
Prostatic Specific AG Diagnostic	54	MRI Pelvis with & without Contrast	800
Prothrombin Time (PT)	22	MRI Thoracic-Spine with & without Contrast	545
Renal Function Panel	32	Mammogram Screening Bilateral	395
Sedimentate Rate RBC Non Auto	16		
Thyroid Stimulation Hormone	41	OTHER	
Troponin Quantitative	68	EKG 12 Lead Tracing Only	\$69
Urinalysis with Micro Auto	24		