

2020 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 Services, Inc.	419-897-8370
Medication Emergency Treatment Corporation (METCO)	855-473-7702
Associated Pathologists	800-383-1656
Toledo Clinic Hospitalists	419-479-5396
Toledo Radiological Associates	800-714-5935



ROOM RATES

Telemetry	\$2,275
Medical/Surgical, Semiprivate	\$1,720
Private Room	\$1,720

INTENSIVE CARE CENTER

Level 1	\$3,540
Level 2	\$2,390
Cardiac Care	\$2,390

CARDIOVASCULAR UNIT

Level 1	\$8,290
Level 2	\$3,540

OBSTETRICS

LDRP	\$2,375
Nursery	\$1,720

EMERGENCY

Level 1	\$213.50
Level 2	\$413
Level 3	\$712
Level 4	\$1,210
Level 5	\$1,780
Critical Care, 30 to 74 minutes	\$2,050

SURGERY

General/MAC Anesthesia, first 15 minutes	\$3,301
additional 15 minutes	\$1,653
Moderate Sedation, first 15 minutes	\$1,978
additional 15 minutes	\$983.75
Local Anesthesia, first 15 minutes	\$1,313
additional 15 minutes	\$659.25
Open Heart, first 15 minutes	\$4,790
additional 15 minutes	\$2,395

SURGERY (CONTINUED)

Robotics, first 15 minutes	\$5,356
additional 15 minutes	\$2,683

OB DELIVERY

Vaginal Delivery	\$3,793.75
Cesarean Section	\$5,822
Labor Room, Level 1	\$1,261
Level 2	\$1,747
Level 3	\$2,243

CARDIOLOGY

EKG	\$405.75
Echocardiography, Complete without Contrast	\$2,377

OTHER SERVICES

Medical Nutrition Therapy, each 15 minutes	\$63
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PET SCAN

Skull to Thigh	\$6,145
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RADIOLOGY

Chest, 1 view	\$225
Chest, 2 views	\$287.75
Mammography Screening, Bilateral with TOMO	\$367
Lumbar Spine, 2 to 3 views	\$348.25
Bone Density/DEXA Scan	\$380

CT SCAN

Abdomen and Pelvis with Contrast	\$2,743
Brain without Contrast	\$1,297
Cervical Spine without Contrast	\$1,162
Thorax without Contrast	\$1,162

MRI

Lumbar Spine without Contrast	\$2,463
Brain without Contrast	\$2,240

ULTRASOUND

Abdomen, Single Organ	\$846.25
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RESPIRATORY THERAPY

Blood Gas, Arterial	\$134.50
Inhalation Treatment	\$200
Pulse Oximetry	\$78.25
Percussion/Vibration	\$118.75
Arterial Puncture	\$60.50
Ventilator, Subsequent Day	\$1,507

PHYSICAL/OCCUPATIONAL THERAPY

Therapeutic Exercise, each 15 minutes	\$130.50
Manual Therapy, each 15 minutes	\$143
Cardiac Rehab with ECG, per session	\$200
Gait Training	\$85
Physical Therapy Evaluation	\$302.50
Therapeutic Activity, each 15 minutes	\$111.50
Electric Stimulation, Unattended, each 15 minutes	\$83
Occupational Therapy, Evaluation up to 30 minutes	\$188
PT Ultrasound, each 15 minutes	\$100

LABORATORY

Allergen-specific IgE	\$20
ALT	\$26.25
Amylase	\$35
Antibody Screen	\$112.75
AST	\$25.25
Blood Draw (Venipuncture)	\$12
Blood Type, ABO	\$159.50
Blood Type RH	\$159.50
BUN	\$19
C-reactive Protein	\$29
Calcium	\$65
CBC with Automated Differential	\$31.50
CBC without Differential	\$30.50

Cell Marker, Additional	\$105
Chemistry Panel, Basic	\$39
Chemistry Panel, Comprehensive	\$50.50
CPK, MB Fraction	\$49
CPK, Total	\$31.50
Creatinine	\$25.25
Creatinine, Other Source	\$25.25
Crossmatch Spin	\$375
Culture, CSF	\$44
Culture, Aerobic	\$47
Culture, Screening	\$26.25
Culture, Blood	\$56
Electrolytes	\$21
Glucose	\$19
Gram Stain	\$23

GYN, Automated Diagnostic	\$140.75
Hematocrit	\$11.50
Hemoglobin A1C	\$46.25
Hepatic Function/Liver Panel	\$30.50
Immunocytochemistry EA AB	\$508.25
Iron	\$30.50
Iron Binding	\$42
Lactic Acid	\$51.50
Lipase	\$32.50
Lipid Profile	\$61
Magnesium	\$26
Natriuretic Peptide	\$146
Phosphorus	\$20
Platelet Count	\$20
Potassium	\$22

Protine (INR)	\$19
PSA	\$74.50
PTT (APTT)	\$27.25
Sed Rate, Automated	\$13.75
Surgical Path Level IV	\$436.75
T4 Free	\$43
Troponin	\$53
TSH	\$75.50
Urinalysis	\$10.50
Urinalysis, Automated with Microscopy	\$19
Urine, Culture	\$38.75
Urine, Creatinine, Random	\$25.25
Urine, Pregnancy	\$29
Vitamin B-12	\$72.50
Vitamin D	\$127