

Hospital Charges (Price Line Common Requested)

Contact the Business Office for Verification and Tests/Procedures Not Listed (585) 786-8940 x-4404

Diagnostic All diagnostic imaging services will receive a separate bill from St. Lawrence Radiology for Professional Reading of the image.	Charge
Ankle	\$ 84.32
Abdomen, 1 view (kidney, ureter, bladder)	75.81
Cervical spine, 5 views	150.57
Chest, 1 view	60.17
Chest, 2 views z	102.80
Chest portable, 1 view	60.17
CT abdominal/pelvis with contrast	975.14
CT abdominal/pelvis with/without contrast	1,083.60
CT abdominal/pelvis without contrast	662.24
CT head	722.40
DEXAscan	331.07
Foot	84.32
Hand	84.32
Hip	90.30
Knee, 2 views	80.75
Knee, complete	120.12
Lumbar spine, 2 views	96.29
Lumbar spine, complete	162.65
Mammogram screening, digital	246.86
Mammogram, unilateral diagnostic digital	228.80
MRI brain with/without contrast	2,160.38
MRI lumbar spine, without contrast	1,562.09
Shoulder, complete	80.75
Thoracic spine, 3 views	90.30
Ultrasound abdominal, complete	300.93
Ultrasound carotid Doppler duplex, bilateral	389.13



Diagnostic	(Charge
Ultrasound Doppler peripheral imaging bilateral leg		433.44
Ultrasound Doppler peripheral leg limited		300.93
Ultrasound limited, OB ultrasound		210.74
Ultrasound OB, 1st trimester transvaginal		270.90
Ultrasound pelvis		300.93
Ultrasound pregnancy complete		300.93
Ultrasound transvaginal pelvic		300.93
Ultrasounds renals		300.93
Ultrasounds thyroid, soft tissue neck		300.93
Wrist, minimum of 3 views		90.30
Lab	(Charge
Basic Metabolic Panel	\$	55.86
CBC		22.89
CBC and Differential		27.09
СК		18.90
Comp Metabolic Panel		46.94
Culture Urine		79.91
Free T4		63.74
HBA1c		46.83
Hepatic Function Panel		82.22
Iron		42.95
Surgical Pathology, Level 4		237.20
Lipid Panel with Reflex		84.53
Prothrombin Time		23.73
PSA with Reflex To Free		74.97
PTT		29.93
Transferrin		39.90
Troponin I		63.84
TSH		88.62
Venipuncture		15.86
Vitamin B12		23.42

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Vitamin D 25-Hydroxy

78.44



Approximate Ambulatory Procedures All ambulatory procedures will receive a separate bill from the physician **Blood Transfusion Service** \$ 2,407.86 2,961.53 **Carpal Tunnel Surgery Cataract Surgery Complex** 5,552.82 Cataract Surgery with Intraocular Lens 1 Stage 4,163.78 Colonoscopy and Biopsy 1,936.10 Create Eardrum Opening 2,970.24 Diagnostic Colonoscopy 1,002.44 **Drainage of Skin Abscess** 546.00 Draw Blood Off Venous Device 425.88 Endovenous Radiofrequency (RF) 1st Vein 7,618.91 1,920.87 Excision Face 1.1 to 2.0 cm Excision Trunk 1.1 to 2 cm 1,428.32 Excision Trunk 2.1 to 3 cm 1,646.72 Gastro Endoscopy Biopsy 1,215.38 Gastro Endoscopy Diagnostic 931.46 Gastro Endoscopy/Guide Wire 1,857.45 3,600.35 Hysteroscopy with Biopsy Inguinal hernia 6,104.28 Knee Arthroscopy/Surgery 6,562.92 Laparoscopic Appendectomy 7,889.70 Laparoscopic Cholecystectomy 6,371.82 Remove Tonsils and Adenoids 4,804.80 Sinus Endoscopy Surgical 18,236.40

Vitrectomy for Macular Pucker

7,846.02



Charge per

Emergency Room Visits

Visit

UB | MD Emergency Medicine physicians and practitioners will be providing emergency services to the WCCHS Emergency Department and ER Express. Please be advised that you may receive a separate bill for their services.

Does not include ancillary service

Emergency Dept. Visit-Level 1	\$ 133.00
Emergency Dept. Visit-Level 2	219.00
Emergency Dept. Visit-Level 3	382.00
Emergency Dept. Visit-Level 4	639.00
Emergency Dept. Visit-Level 5	945.00
Critical Care First Hour	1,261.00
Critical Care Additional Half Hour	634.00

Approxi	imate
Charge	e per

Inpatient Visit Room and Board	Day	
Medical/Surgical (Private)	\$	1,210.00
Medical/Surgical (Semi-Private)		1,103.00
Women's and Maternity Health (Obstetrics) (Private)		1,210.00
Women's and Maternity Health (Obstetrics) (Semi-Private)		1,103.00
Intensive Care Unit (ICU)		2,153.00
Nursery		780.00
Behavioral Health		1,150.00

Approximate Charge per

Observation Basic Charge	ŀ	Hour	
Medical/Surgical	\$	46.00	

Intensive Care Unit 90.00