

Self Pay Fee Schedule	Date:
Patient:	
Office visit	\$125
Follow up	50
Joint Injection and/or aspiration- sm	50
Joint Injection and/or aspiration- med	75
Joint Injection and/or aspiration- lg	125
Basic Metabolic Profile	50
Camp/Sports Physical	40
Casting- LE	100
Casting- UE	50
CBC	50
Cryotherapy (per)	75
Dermabond	50
DOT physical	70
Ear Wash per ear	50
EKG	100
Flu Test	60
Flu Vaccine (4yrs and older)	40
Flu Vaccine (6 mos- 4 yrs)	50
Foreign Body Removal	50
Hep B Vaccine	120
I&D Abscess	125
Injections	60
IV fluids	100
IV additional liters	50
Jet Nebulizer/Albuterol	50
Jet Nebulizer/Albuterol w/ O2	100
Lab Handling	15
Meningitis Vaccine	150
Oral Meds	5
Pregnancy UA	25
PT/INR	50
RSV Test	60
Splinting- LE	80
Splinting- UE	50
Strep	30
Suturing < 3 cm	125
Suturing 3 - 6 cm	175
Suturing > 6 cm	225
TB Test	35
Tdap Vaccine	75
Ultrasound, limited/complete	75/150
Urinalysis	25
Urine Drug Screen 10 Panel	50
XRAY	75
PRP Small Kit	500
PRP Large Kit	750
Bone Marrow Kit	2000

updated 9/7/2018