

CT-SCAN SERVICES	MHARSMC CHARGES/ RATES
BRAIN & CERVICAL PLAIN	8,040.00
BRAIN CONTRAST	6,672.00
BRAIN PLAIN	3,600.00
CERVICAL PLAIN	4,440.00
CERVICOTHORACIC CONTRAST	12,432.00
CHEST AND UPPER ABD. PLAIN	10,080.00
CHEST AND UPPER ABD. W/ CONTRAST	15,312.00
CHEST AND WHOLE ABD. PLAIN	14,880.00
CHEST AND WHOLE ABD. W/ CONTRAST	20,112.00
CHEST/ THORACIC CONTRAST	10,272.00
CHEST/ THORACIC PLAIN	5,040.00
CRANIOFACIAL PLAIN	9,240.00
CRANIOTEMPORAL CONTRAST	11,112.00
EXTREMITY PLAIN	4,440.00
EXTREMITY WITH 3D RECON	6,240.00
FACIAL BONE PLAIN	5,640.00
FACIAL BONE W/ 3D RECON	6,240.00
FACIAL WITH CONTRAST	9,312.00
HEAD, NECK & CHEST CONTRAST	18,312.00
HIP PLAIN	3,840.00
KNEE PLAIN (EXTREMITY)	4,440.00
FOREARM PLAIN (EXTREMITY)	4,440.00
Lumbar Spine Contrast	11,232.00
Lumbar Spine Plain	6,000.00
LUMBAR- SACRAL SPINE CONTRAST	12,432.00
LUMBAR-SACRAL SPINE PLAIN	7,200.00
MAXILLA PLAIN	5,640.00
NASO/OROPHRAYNX/LARYNX PLAIN	4,440.00
NASOPHARYNX WITH CONTRAST	7,512.00
NECK AND BRAIN PLAIN	8,040.00
NECK AND BRAIN W/ CONTRAST	13,272.00
NECK AND CHEST PLAIN	9,480.00
NECK AND CHEST W/CONTRAST	14,712.00
NECK CONTRAST	7,512.00
NECK PLAIN	4,440.00
NECK, CHEST AND UPPER ABD. PLAIN	14,520.00
NECK, CHEST AND UPPER ABD. W/ CONTRAST	17,592.00

CT-SCAN SERVICES	MHARSMC CHARGES/ RATES
NECK, CHEST AND WHOLE ABD. PLAIN	19,320.00
NECK, CHEST AND WHOLE ABD. W/ CONTRAST	24,432.00
ORBIT WITH CONTRAST	7,512.00
ORBIT/ OSTEOMEATAL COMPLEX	4,440.00
PARANASAL SINUSES PLAIN	4,440.00
PARANASAL SINUSES W/ CONTRAST	7,512.00
PELVIS CONTRAST	9,072.00
PELVIS PLAIN	3,840.00
PITUITARY GLAND/ SELLA	4,440.00
RENAL / ADRENAL	3,840.00
SHOULDER PLAIN (EXTREMITY)	4,440.00
SPINE PLAIN	6,000.00
SPINE WITH 3D RECON (PER REGION)	7,200.00
STONOGRAM	5,640.00
TEMPORAL OR MASTOID PLAIN	4,440.00
TEMPORAL OR MASTOID W/ CONTRAST	9,672.00
UPPER /MID /LOWER ABDOMEN CONTRAST	10,872.00
UPPER /MID /LOWER ABDOMEN PLAIN	5,040.00
UROGRAPHY	15,072.00
WHOLE ABD. CONTRAST	15,072.00
WHOLE ABD. PLAIN	9,840.00

X-RAY SERVICES	MHARSMC CHARGES/ RATES
CHEST:	
CHEST PA or AP View (Adult)	200.00
CHEST PA/L View (Adult)	395.00
CHEST AP/L View (Pedia)	265.00
CHEST LORDOTIC VIEW	200.00
CHEST DECUBITUS	200.00
CHEST BUCKY	200.00
CHEST LATERAL	200.00
ABDOMEN:	
Flat Plate	200.00
Upright	200.00
Flat Plate & Upright view (Adult)	395.00
Flat Plate & Upright view (Pedia)	265.00
Flat Plate view (Pedia)	200.00
Upright view (Pedia)	200.00
K.U.B. (Kidney-Urinary Bladder)	200.00
Skull series	395.00
Mastoid series	395.00
Paranasal sinuses	395.00
Nasal bone	395.00
Maxillary bone	395.00
Mandible	395.00
TMJ (Temporo-Mandibular Joint)	395.00
Neck (Foreign body localization)	265.00
Cervical Spine AP/L Views	265.00
Thoracic spine AP/L Views	395.00
Thoraco-Lumbar spine AP/L views	395.00
Lumbo-Sacral spine AP/L views	395.00
HIP/PELVIS or Buttock AP view	200.00
Sacrum AP/L view	265.00
Coccyx AP/L view	265.00
IMPERFORATE ANUS	265.00
Scoliotic Series	522.00
Shoulder AP View	200.00
Clavicle AP view	200.00
Scapula AP/Y view	265.00
Arm or Humerus APL	318.00

X-RAY SERVICES	MHARSMC CHARGES/ RATES
Elbow AP/L view	265.00
Forearm AP/L view	318.00
Wrist AP/L View	265.00
Hand AP/Obl. view	265.00
Thigh/Femur AP/L	330.00
Tibio-Fibula/LEG AP/L	330.00
Knee AP/L view	265.00
Ankle AP/L view	265.00
Foot AP/OB. View	265.00
Calcaneous AP/L	265.00
Foot APOL	265.00
Hand APOL	395.00
SPECIAL PROCEDURE:	
Barium Enema	200per film
UGIS (Upper G-I series)	200per film
Cholangiogram	200per film
Colonogram	200per film
Cystogram	200per film
Esophagogram	200per film
IVP / IVU	200per film
Myelogram	200per film
Small bowel series	200per film

ULTRASOUND SERVICES	MHARSMC CHARGES/ RATES
ABDOMEN LOWER	730.00
ABDOMEN UPPER	815.00
ABDOMEN WHOLE	985.00
BREAST	560.00
CAROTID	600.00
CERVIX	560.00
GALL BLADDER	480.00
GUIDED ASPIRATION / BIOPSY	6,000.00
HEPATOBIILIARY TREE (HBT)	564.00
KIDNEY	480.00
KUB (KIDNEY-URINARY BLADDER)	564.00
KUB - LIVER	650.00
KUB - LIVER - GALL BLADDER	650.00
KUB - PROSTATE	650.00
KUB-PROSTATE-GALL BLADDER-PANCREAS	815.00
LIVER	480.00
LIVER-GB-SPLEEN-PANCREAS	730.00
LIVER-SPLEEN	650.00
LUNGS/HEMITHORAX	480.00
OB PROFILE	560.00
PANCREAS	480.00
PELVIS	480.00
PROSTATE	560.00
SCROTUM	560.00
SOFT TISSUE	600.00
SPLEEN	480.00
THYROID	560.00
TRANS-CRANIAL	560.00
TRANS-VAGINAL (TVS)	560.00
URINARY BLADDER	480.00
VASCULAR PER EXTREMITIES	2,400.00
2D ECHO:	
ADULT/PEDIA	3,500.00