

Galion Community Hospital

Most Common Charges Effective 07/08

Room and Board

• Private (3020100)	\$431.00	ECU - Skilled (3110501)	\$202.00
• I.C.U. (3120200)	\$905.00	ECU –Non-skld (3110601)	\$168.00
• Obstetrics (3080300)	\$431.00	In-Patient Rehab (3130010)	\$590.00
• Nursery (3090400)	\$431.00	ECU-Hospice Respite skld (3110700)	\$202.00

Most Common X-ray Procedures

CT Head w/o Contrast (1604503)	\$ 650.40	CT Head w & w/o Contrast (1604701)	\$ 896.00
CT Limited Sinuses (1604834)	\$ 604.50	CT Chest w Contrast (Thorax) (1612605)	\$1456.60
CT Pelvis w Contrast (1621937)	\$1571.70	CT Abdomen w Contrast (1641604)	\$2047.90
CT Abdomen w & w/o Contrast (1641703)	\$2093.50	Abdomen X-ray (KUB) (1700012)	\$ 151.10
Acute Abdominal Series X-ray (1700038)	\$ 247.90	Chest X-ray (PA & Lateral Views) (1700103)	\$ 114.90
Ankle X-ray (1707016)LT	\$ 211.10	Finger X-ray (1707430)	\$ 112.80
Foot X-ray (1707249) LT	\$ 232.20	Hip and Pelvis X-ray (1707529)	\$ 81.30
Pelvis X-ray (1700723)	\$ 63.80	Lumbar Spine X-ray AP and Lateral) (1701051)	\$ 342.50
Screening Mammogram (1707730)	\$ 130.20	Modified Barium Swallow (1740265)	\$ 95.60
Ultrasound Abdomen (Complete) (1705250)	\$ 675.90	Ultrasound Extremity Non Vas bil. (1740361)	\$ 234.50
Ultrasound Gall Bladder (1705284)	\$ 608.50	Ultrasound Carotid Duplex Bil. (1720200)	\$ 469.10
Ultrasound Non-invasive Arterial Study (Rest and Stress)(1720614)	\$ 348.40	MRA Brain w/ contrast 1730027	\$2000.00
MRI Brain w & w/o Contrast (1730035)	\$3675.00	MRI Lumbar Spine w/o Contrast (1730340)	\$2100.00
MRI Knee (1731220)	\$1785.00	Nuclear Medicine Total Bone Scan (0700039)	1009.50
Nuclear Medicine Thyroid Scan Uptake w/image (0700286)	\$ 1118.30	Nuclear Medicine Heart (Stress +Rest) (0700609)	\$2504.60
Portable Chest X ray (1705508)	\$ 96.40		

Most Common Lab Procedures

Lipid Panel (8000200)	\$ 168.50	Hepatic Panel (8000705)	\$ 60.50
Electrolytes Panel (8000101)	\$ 37.40	Routine Urinalysis (8100000)	\$ 25.30
Carbon Dioxide (8237406)	\$ 8.20	Chloride, Blood (8243503)	\$ 8.20
Creatinine, Blood (8256505)	\$ 15.40	Glucose, Quantitative (8294704)	\$ 23.10
PSA (8200073)	\$ 66.00	Amylase (8215006)	\$ 25.30
Bilirubin, Total (8225005)	\$ 44.00	Calcium, Total (8231003)	\$ 15.40
CBC and Platelets (8502205)	\$ 35.20	Prothrombin Time (8561003)	\$ 18.30
Syphilis Test (8659203)	\$ 38.50	Cancer Antigen (8631616)	\$ 201.50
Blood Typing (8608200)	\$ 51.30	APTT (8573008)	\$ 28.60
Sedimentation Rate (8565004)	\$ 64.10	Platelet count (8559502)	\$ 16.50
Hemoglobin (8501801)	\$ 14.30	Thyroid Stim. (8444309)	\$ 170.40
Urea Nitrogen Quantitative (8452005)	\$ 14.30	Sodium Serum (8429508)	\$ 10.50
Potassium, Serum (8413205)	\$ 10.50	Troponin I (8444150)	\$ 61.50
Newborn Metabolic (8403008)	\$ 102.60	Magnesium (8373508)	\$ 25.30
LDH (8361503)	\$ 23.10	Glycohemoglobin (8303604)	\$ 64.10

Basic Metabolic Panel (8000754)	\$ 52.80	Comp. Metabolic Panel (8001604)	\$ 57.60
PSA (8215304)	\$ 65.90	Iron Serum (8354003)	\$ 24.20
Gamma GT (8297707)	\$ 33.00	CKMB (8300014)	\$ 41.80
Phosphatase, Alkaline (8407504)	\$ 26.40	Phosphorus, Serum (8410003)	\$ 14.30
Myoglobin (8423113)	\$ 46.20	Thyroxine, Free T4 (8444101)	\$ 139.20
Urine Drug Screen – (8002206)	\$ 35.00	AST (SGOT) (8445504)	\$ 56.90
Uric Acid Blood (8455008)	\$ 15.40	Culture Urine w/colony (8708604)	\$ 55.00
Urine Organism ID (8708801)	\$ 76.90	Sensitivity Study (8718702)	\$ 36.30
Cytopathology thin prep (8817501)	\$ 89.90	Level IV Surgical path (8830606)	\$ 254.60
ALT (SGPT) (8846503)	\$ 56.80	CBC & Platelet w/ auto diff (8502205)	\$ 35.20

Emergency Room Services

- Emergency Service Limited \$ 108.50 (0100013)
- Emergency Service Level 2 \$ 159.10 (0100220)
- Emergency Service Level 3 \$ 207.50 (0100238)
- Emergency Service Level 4 \$.325.40 (0100246)
- Emergency Service Level 5 \$ 440.10 (0100268)

Operating Room Services

- Single Major Surgery First Hour \$ 3360.40 (0300004)
- Double Surgery First Hour \$ 3446.20 (0300012)
- Minor Surgery First 1/2 Hour \$ 1567.20 (0300053)
- EGD \$ 725.30 (0303016)
- Colonoscopy \$ 1356.60 (0303032)
- Yag Laser \$ 723.00 (0300111)
- Holmium Laser \$ 4202.10 (0300707)

Delivery Room Services

- Delivery Room \$ 2614.20 (0500009)

Physical, Occupational, and Pulmonary Therapy Services

Physical Therapy

- Therapeutic Activity \$ 43.80 (1907689)
- Gait Training \$ 42.50 (1900265)
- Anodyne Therapy \$ 11.40 (1900013)
- PT Evaluation \$ 86.50 (1900034)
- Electrical Stimulation \$ 61.50 (1900026)
- Ultrasound \$ 88.00 (1900224)
- Manual Therapy \$ 104.00 (1907658)

Occupational Therapy

- Therapeutic Activity \$ 43.80 (1801214)
- Therapeutic Procedure \$ 49.80 (1801137)
- Neuromuscular Re-education \$ 49.80 (1801148)

Cardiac Rehab

- Phase III – 3 Months \$ 137.40 (1300102)
- Phase III – 1 Month \$ 49.50 (1300128)

Pulmonary Therapy

- EKG \$ 89.00 (1300003)
- Stress EKG \$ 778.50 (1300011)
- Phase II Rehab \$ 79.60 (1000101)
- Phase III Rehab per Month \$ 46.90 (10001268)

Sleep Lab

- Polysomnogram \$ 3008.30 (7400010)
- PSG with CPAP/B \$ 3008.30 (7400029)

This is not a complete list of all hospital charges. Individual procedures may incur higher charges reflecting the cost of supplies. This list does not include the cost of services provided by **Hospital affiliated professionals** such as **Radiologist, Pathologist, Anesthesiologists or ER Physicians.**