



UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

SHORE MEDICAL CENTER AT EASTON
Estimated Charges for Common Ancillary Services

LABORATORY

Procedure	Estimated Charge
Complete cbc w/auto diff wbc	\$ 20.22
Comprehen metabolic panel	\$ 60.48
Urinalysis auto w/o scope	\$ 8.00
Assay of troponin quant	\$ 64.34
Urinalysis auto w/scope	\$ 18.14
Assay of ck (cpk)	\$ 14.43
Prothrombin time	\$ 16.11
Creatine mb fraction	\$ 36.27
Assay of magnesium	\$ 12.14
Thromboplastin time partial	\$ 16.12
Metabolic panel total ca	\$ 22.26
Assay of lipase	\$ 16.15
Reagent strip/blood glucose	\$ 14.78
Urine pregnancy test	\$ 20.23
Urine culture/colony count	\$ 40.23
Assay of amylase	\$ 12.12
Assay thyroid stim hormone	\$ 30.52
Blood typing serologic rh(d)	\$ 8.16
Blood typing serologic abo	\$ 8.17
Assay of natriuretic peptide	\$ 60.05
Rbc antibody screen	\$ 24.60
Blood culture for bacteria	\$ 126.14
Strep a ag eia	\$ 49.68
Fibrin degradation quant	\$ 30.35
Culture screen only	\$ 39.91

RADIOLOGY

Procedure	Estimated Charge
Chest x-ray 2vw frontal&latl	\$ 144.59
Ntsty modul rad tx dlvr smpl	\$ 1,112.86
Ct abd & pelv w/contrast	\$ 319.07
Ct abd & pelvis w/o contrast	\$ 255.99
Ct angiography chest	\$ 437.94
Ct neck spine w/o dye	\$ 128.64
Mri brain stem w/o & w/dye	\$ 913.07
Mri lumbar spine w/o dye	\$ 494.85
Mri brain stem w/o dye	\$ 529.85
Mri neck spine w/o dye	\$ 503.39
Mri joint upr extrem w/o dye	\$ 810.57
Ultrasound breast limited	\$ 551.10
Us exam pelvic complete	\$ 533.03
Transvaginal us non-ob	\$ 528.74
Ob us < 14 wks single fetus	\$ 532.46
Transvaginal us obstetric	\$ 536.64
Chest x-ray 2vw frontal&latl	\$ 144.59
Ntsty modul rad tx dlvr smpl	\$ 1,112.86
Ntsty modul rad tx dlvr cplx	\$ 1,191.88
X-ray exam of knee 3	\$ 154.09
X-ray exam l-2 spine 4/>vws	\$ 292.30
Radiation treatment delivery	\$ 641.79
Guidance for radiaj tx dlvr	\$ 216.86
Radiation physics consult	\$ 207.78
Radiation treatment aid(s)	\$ 611.62

SHORE MEDICAL CENTER AT EASTON
Estimated Charges for Common Outpatient Procedures

OUTPATIENT SURGERY	Charge Range		Average Estimated Charge
	Minimum	Maximum	
Bx breast 1st lesion us imag	\$ 1,005	\$ 7,152	\$ 3,521
Access av dial grft for eval	\$ 974	\$ 14,542	\$ 4,201
Access av di graft for eval	\$ 964	\$ 9,982	\$ 2,813
Abd paracentesis w/imaging	\$ 1,020	\$ 6,872	\$ 2,085
Cysto/uretero w/lithotripsy	\$ 3,849	\$ 13,328	\$ 6,458
Hysteroscopy biopsy	\$ 1,574	\$ 8,064	\$ 2,574
Fetal non-stress test	\$ 521	\$ 4,527	\$ 1,156
Diagnostic mammography digital	\$ 1,184	\$ 8,413	\$ 3,593
Therapeutic procd strg endur	\$ 1,517	\$ 23,865	\$ 10,282
Image guided breast biopsy	\$ 875	\$ 10,991	\$ 2,977

SHORE MEDICAL CENTER AT DORCHESTER
Estimated Charges for Common Ancillary Services

LABORATORY

Procedure	Estimated Charge
Complete cbc w/auto diff wbc	\$ 27.18
Comprehen metabolic panel	\$ 82.09
Urinalysis auto w/scope	\$ 24.49
Assay of troponin quant	\$ 86.96
Urinalysis auto w/o scope	\$ 10.82
Assay of ck (cpk)	\$ 18.60
Prothrombin time	\$ 21.93
Assay of magnesium	\$ 16.37
Assay thyroid stim hormone	\$ 40.84
Metabolic panel total ca	\$ 29.75
Creatine mb fraction	\$ 47.27
Lipid panel	\$ 51.78
Assay of lipase	\$ 21.78
Thromboplastin time partial	\$ 21.77
Urine pregnancy test	\$ 27.18
Reagent strip/blood glucose	\$ 20.88
Culture screen only	\$ 54.83
Urine culture/colony count	\$ 54.46
Glycosylated hemoglobin test	\$ 54.09
Vitamin d 25 hydroxy	\$ 41.02
Assay of amylase	\$ 16.37
Assay of creatinine	\$ 5.34
Assay of natriuretic peptide	\$ 80.24
Strep a ag eia	\$ 66.98
Fibrin degradation quant	\$ 40.46

RADIOLOGY

Procedure	Estimated Charge
Ct head/brain w/o dye	\$ 87.39
Ct abd & pelv w/contrast	\$ 291.10
Ct abd & pelvis w/o contrast	\$ 232.75
Ct thorax w/dye	\$ 143.25
Ct thorax w/o dye	\$ 115.16
Mri brain stem w/o & w/dye	\$ 818.50
Mri lumbar spine w/o dye	\$ 459.75
Mri jnt of lwr extre w/o dye	\$ 711.54
Mri brain stem w/o dye	\$ 464.10
Mri joint upr extrem w/o dye	\$ 679.33
Us exam abdom complete	\$ 474.61
Us exam pelvic complete	\$ 433.22
Transvaginal us non-ob	\$ 431.87
Ultrasound breast limited	\$ 433.07
Ob us < 14 wks single fetus	\$ 424.63
Chest x-ray 2vw frontal&latl	\$ 117.04
X-ray exam of foot	\$ 137.46
X-ray exam l-2 spine 4/>vws	\$ 237.28
X-ray exam of knee 3	\$ 133.19
Chest x-ray 1 view frontal	\$ 79.79
X-ray exam of ankle	\$ 123.30
X-ray exam of shoulder	\$ 124.60
X-ray exam neck spine 4/5vws	\$ 158.04
X-ray exam of hand	\$ 132.82
X-ray exam series abdomen	\$ 233.96

SHORE MEDICAL CENTER AT DORCHESTER
Estimated Charges for Common Outpatient Procedures

OUTPATIENT SURGERY	Charge Range		Average Estimated Charge
	Minimum	Maximum	
Egd biopsy single/multiple	\$ 1,225	\$ 12,320	\$ 3,279
Colonoscopy and biopsy	\$ 1,451	\$ 5,050	\$ 2,762
Colonoscopy w/lesion removal	\$ 1,612	\$ 10,167	\$ 3,744
Laparoscopic cholecystectomy	\$ 5,596	\$ 15,616	\$ 9,271
Abominal paracentesis	\$ 924	\$ 21,670	\$ 4,201
Repair hernia initial inguina >5 yr	\$ 3,183	\$ 10,477	\$ 5,591
Hernia repair w/mesh	\$ 2,756	\$ 13,870	\$ 6,659
Egd place gastrostomy tube	\$ 3,729	\$ 4,328	\$ 4,105
Pulmonary rehab w exer	\$ 293	\$ 2,674	\$ 1,240



SHORE MEDICAL CENTER AT CHESTERTOWN
Estimated Charges for Common Ancillary Services

LABORATORY

Procedure	Estimated Charge
Complete cbc w/auto diff wbc	\$ 36.75
Comprehen metabolic panel	\$ 110.02
Assay thyroid stim hormone	\$ 55.18
Lipid panel	\$ 69.53
Prothrombin time	\$ 29.53
Metabolic panel total ca	\$ 40.39
Urinalysis auto w/scope	\$ 33.20
Urinalysis auto w/o scope	\$ 14.59
Urine culture/colony count	\$ 73.45
Assay of troponin quant	\$ 130.36
Thromboplastin time partial	\$ 29.70
Glycosylated hemoglobin test	\$ 73.21
Assay of ck (cpk)	\$ 27.79
Creatine mb fraction	\$ 71.03
Assay of magnesium	\$ 22.04
Vitamin d 25 hydroxy	\$ 55.35
Strep a ag eia	\$ 91.37
Urine pregnancy test	\$ 36.87
Assay of lipase	\$ 29.48
Reagent strip/blood glucose	\$ 27.95
Culture screen only	\$ 73.77
Assay of creatinine	\$ 7.27
Assay of urea nitrogen	\$ 7.27
Culture aerobic identify	\$ 41.95
Influenza assay w/optic	\$ 174.59

RADIOLOGY

Procedure	Estimated Charge
Ct head/brain w/o dye	\$ 172.84
Ct abd & pelvis w/o contrast	\$ 466.22
Ct abd & pelv w/contrast	\$ 578.63
Ct thorax w/dye	\$ 284.57
Ct thorax w/o dye	\$ 223.54
Mri lumbar spine w/o dye	\$ 665.62
Mri jnt of lwr extre w/o dye	\$ 1,022.20
Mri brain stem w/o & w/dye	\$ 1,233.49
Mri neck spine w/o dye	\$ 668.32
Mri joint upr extrem w/o dye	\$ 1,045.64
Us exam abdom complete	\$ 543.98
Breast tomosynthesis bi	\$ 47.49
Us exam pelvic complete	\$ 504.82
Transvaginal us non-ob	\$ 502.21
Us exam of head and neck	\$ 270.80
Chest x-ray 2vw frontal&latl	\$ 134.90
Chest x-ray 1 view frontal	\$ 94.06
X-ray exam of foot	\$ 147.58
X-ray exam l-2 spine 4/>vws	\$ 271.22
X-ray exam of shoulder	\$ 146.08
X-ray exam of ankle	\$ 143.01
X-ray exam of knee 3	\$ 158.98
X-ray exam knee 4 or more	\$ 347.18
X-ray exam of hand	\$ 157.91
X-ray exam neck spine 4/5vws	\$ 182.69

SHORE MEDICAL CENTER AT CHESTERTOWN
Estimated Charges for Common Outpatient Procedures

OUTPATIENT SURGERY	Charge Range		Average Estimated Charge
	Minimum	Maximum	
Drain/inj joint/bursa w/o us	\$ 377	\$ 2,692	\$ 1,850
Egd diagnostic brush wash	\$ 790	\$ 7,433	\$ 1,820
Egd biopsy single/multiple	\$ 524	\$ 8,920	\$ 2,196
Diagnostic colonoscopy	\$ 968	\$ 6,858	\$ 1,746
Colonoscopy and biopsy	\$ 1,280	\$ 7,947	\$ 2,098
Colonoscopy w/ablation	\$ 1,081	\$ 5,734	\$ 2,005
Prp i/hern init reduc >5 yr	\$ 2,292	\$ 6,511	\$ 4,200
Colorectal scrn; hi risk ind	\$ 1,040	\$ 3,100	\$ 1,662
Colon ca scrn not hi rsk ind	\$ 1,075	\$ 2,706	\$ 1,642
Therapeutic procd strg endur	\$ 3,925	\$ 21,970	\$ 10,247