

2026 PRICE LIST

Please note that the hospital prices listed here do not include doctor’s fees. Physicians bill their charges separately. Contact information is listed below for some of the commonly billed physician charges associated with hospital services. For any questions about the information listed here please call 419-824-9015.

ROOM RATES

Medical/Surgical, Private	\$1,946
Medical/Surgical, Semi Private	\$1,946
Intermediate Care	\$3,096
Intensive Care	\$4,267
Psychiatric, Semi Private	\$1,915
Nursery	\$1,260

EMERGENCY CENTER VISITS

Level 1	\$426
Level 2	\$782
Level 3	\$1,211
Level 4	\$1,494
Level 5	\$1,809

OPERATING ROOM

General/MAC Anesthesia, First 15 Minutes	\$4,554
Additional 15 Minutes	\$1,273
Moderate Sedation, First 15 Minutes	\$3,014
Additional 15 Minutes	\$697
Local Anesthesia, First 15 Minutes	\$2,495
Additional 15 Minutes	\$707
Robotic Surgery, First 15 Minutes	\$6,972
Additional 15 Minutes	\$1,406

CARDIOLOGY

Electrocardiogram	\$213
Echocardiography Complete without Contrast	\$2,172
Cardiac Rehab Phase 2 with ECG, Per Session	\$278

CT SCAN

Head or Brain without Contrast	\$1,543
Abdomen and Pelvis with Contrast	\$4,447
Abdomen and Pelvis without Contrast	\$3,670
Chest Angiography with Contrast	\$2,527
Cervical Spine without Contrast	\$2,279

PHYSICAL/OCCUPATIONAL THERAPY

PT Evaluation, Moderate Complexity	\$379
OT Evaluation, Moderate Complexity	\$379
Therapeutic Activity, Each 15 Minutes	\$177
Therapeutic Exercise, Each 15 Minutes	\$134
Manual Therapy, Each 15 Minutes	\$150
Speech Therapy, Individual	\$342
Hot/Cold Packs Therapy	\$29
Neuromuscular Re-Education, Each 15 Minutes	\$128
Self Care/Home Management, Each 15 Minutes	\$131
PT Gait Training, Each 15 Minutes	\$128

RADIOLOGY

Abdomen, 1 View	\$219
Chest, 1 View	\$226
Chest, 2 Views	\$234
Mammography Screening - Bilateral with CAD	\$636
Dexa Scan Central Skeletal	\$847
Shoulder, 2 or More Views	\$369

RESPIRATORY THERAPY/PULMONARY

Demo/Evaluation Patient Use of Inhaler	\$300
Inhalation Treatment	\$171

ULTRASOUND

Abdomen Limited	\$662
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LABORATORY

Alcohol; Any Specimen Except Urine and Breath	\$101
Allergen Specific IGE	\$20
Antibiotic Sensitivity	\$159
Antibody Screen, Each Technique	\$65
Heparin Assay	\$173
Basic Metabolic Panel	\$105
Bilirubin, Direct	\$25
Blood Draw (Venipuncture)	\$22
Blood Gas Analysis	\$139
Blood Type ABO	\$38
Blood Type RH	\$40
C Reactive Protein	\$53
Calcium Ionized	\$64
CBC with Auto Differential	\$65
CBC without Differential	\$52
Chlamydia DNA (PCR)	\$169
Comprehensive Metabolic Panel	\$136
COVID-19	\$240
CPK, Total	\$55

Creatinine	\$32
Creatinine, Other Source	\$19
Culture, Bacterial Aerobic Isolate	\$53
Culture, Blood	\$96
Culture, Other Source	\$102
Culture, Urine	\$79
D Dimer, Quantitative	\$68
Drug Screen, Instrumented	\$347
Ferritin	\$63
Folic Acid Serum	\$90
Follicle Stimulating Hormone	\$83
Gammaglobulin, Each	\$96
HCG Serum Pregnancy, Quantitative	\$56
Gonorrhea DNA (PCR)	\$169
Hematocrit	\$32
Hemoglobin	\$32
Hemoglobin A1C	\$64
Hepatic Function - Liver Panel	\$96
Hepatitis B Surface Antigen	\$44

Hepatitis C Antibody	\$56
HIV1 Antigen, HIV1 and HIV2 Antibodies	\$169
Infectious Disease, Upper Respiratory	\$734
Insulin	\$63
Iron	\$56
Iron Binding Capacity	\$56
Lactic Acid	\$47
LDH	\$49
Lipase	\$56
Lipid Panel	\$96
Magnesium	\$47
Microalbumin Urine	\$34
Natriuretic Peptide	\$147
Nuclear Antigen Antibody	\$59
Phosphorous	\$19
Platelet Count, Automated	\$47
Potassium	\$34
Procalcitonin	\$220
Prothrombin Time	\$36

PSA	\$100
PTH	\$148
PTT/APTT	\$45
Sedimentation Rate	\$14
Smear, Gram or Giemsa	\$47
Surgical Pathology Level IV	\$229
Syphilis	\$55
T3 Free	\$70
T4 Free	\$107
Testosterone	\$102
Troponin	\$99
TSH	\$113
Uric Acid, Blood	\$37
Urinalysis, Automated	\$53
Urinalysis, Macroscopic	\$21
Urine Pregnancy	\$42
Vitamin B12	\$94
Vitamin D	\$107