

## 2019 Cost Comparisons



	<b>Toledo Clinic*</b>	ProMedica Flower Hospital		ProMedica Toledo Hospital		ProMedica Bay Park Hospital		Mercy St. Vincent Hospital		Mercy St. Anne's Hospital		Mercy St. Charles Hospital	
	<b>Prices</b>	<b>Hospital</b>	<b>Outpatient</b>	<b>Hospital</b>	<b>Outpatient</b>	<b>Hospital</b>	<b>Outpatient</b>	<b>Hospital</b>	<b>Outpatient</b>	<b>Hospital</b>	<b>Outpatient</b>	<b>Hospital</b>	<b>Outpatient</b>
Amylase	<b>\$14.48</b>	\$197	\$59	\$197	\$59	\$197	\$59	\$173	\$72	\$227	\$40	\$193	\$72
CBC w/Diff	<b>\$20.06</b>	\$150	\$21	\$150	\$21	\$150	\$21	\$196	\$33	\$256	\$33	\$243	\$33
Comp Met Panel (CMP)	<b>\$26.06</b>	\$418	\$28	\$418	\$28	N/A	N/A	\$411	\$51	\$567	\$51	\$523	\$51
Urine Culture	<b>\$22.00</b>	\$193	\$22	\$193	\$22	\$193	\$22	\$143	\$56	\$160	\$56	\$218	\$67
Hematocrit	<b>\$8.83</b>	\$54	\$9	\$54	\$9	\$54	\$9	\$64	\$21	\$84	\$21	\$79	\$21
Hemoglobin	<b>\$8.83</b>	\$61	\$9	\$61	\$9	\$61	\$9	\$64	\$20	\$84	\$21	\$79	\$21
Hepatic Function Panel	<b>\$26.50</b>	\$256	\$26	\$256	\$26	\$256	\$26	\$174	\$70	\$227	\$70	\$221	\$70
Lipase	<b>\$15.13</b>	\$193	\$29	\$193	\$29	\$193	\$29	\$185	\$75	\$242	\$47	\$207	\$75
Hemoglobin A1C	<b>\$23.52</b>	\$202	\$24	\$202	\$24	\$202	\$24	\$108	\$57	\$141	\$57	\$124	\$57
Lipid Panel	<b>\$42.83</b>	\$401	\$44	\$401	\$44	\$401	\$44	\$262	\$78	\$342	\$78	\$334	\$78
Protime/INR	<b>\$8.67</b>	\$94	\$9	\$94	\$9	\$94	\$9	\$101	\$35	\$67	\$36	\$65	\$36
PSA	<b>\$45.76</b>	N/A	N/A	\$254	\$47	\$254	\$47	\$118	\$55	\$149	\$55	\$131	\$55
TSH	<b>\$39.14</b>	\$353	\$41	\$353	\$41	\$353	\$41	\$292	\$85	\$377	\$85	\$167	\$85
Urinalysis w/Micro	<b>\$8.75</b>	\$81	\$45	\$81	\$45	\$81	\$45	\$84	\$37	\$107	\$37	\$107	\$37
Venipuncture (Blood Draw)	<b>\$6.00</b>	\$26	\$15	\$26	\$15	\$26	\$15	\$30	\$20	\$37	\$20	\$37	\$20

**The Toledo Clinic does not charge facility fees. Prices are as listed, but subject to change.**

\*The Toledo Clinic lab charge also includes pathologist professional fees, which is typically an additional and separate charge for hospital billed services. Most, but not all insurance plans, are accepted and patient pricing may vary based on the individual's insurance plan. The Toledo Clinic has the option to send to a reference lab if insurance isn't accepted (cost not guaranteed).  
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# The Toledo Clinic Imaging Center

419.473.3561 | ToledoClinic.com

## 2019 Cost Comparisons



	Toledo Clinic*	Mercy St. Anne's	Mercy St. Charles	Mercy St. Vincent	ProMedica Baypark	ProMedica Flower	ProMedica Toledo	St. Luke's	UTMC
	Prices	Prices	Prices	Prices	Prices	Prices	Prices	Prices	Prices
MRI Brain	<b>\$585 - \$1,023</b>	\$1,150 - \$2,475	\$1,100 - \$2,400	\$1,100 - \$2,400	\$1,200 - \$2,550	\$1,250 - \$2,700	\$1,200 - \$2,550	\$1,150 - \$2,475	\$1,650 - \$3,600
MRI Cervical Spine	<b>\$525 - \$895</b>	\$1,100 - \$2,400	\$1,100 - \$2,400	\$1,100 - \$2,400	\$1,050 - \$2,250	\$1,100 - \$2,400	\$1,050 - \$2,325	\$1,050 - \$2,250	\$875 - \$1,900
CT Brain	<b>\$140 - \$506</b>	\$625 - \$1,350	\$700 - \$1,550	\$625 - \$1,350	\$480 - \$1,050	\$460 - \$1,000	\$450 - \$1,000	\$410 - \$900	\$430 - \$925
PET Scan (Skull to mid-thigh)	<b>\$871 - \$2,991</b>	\$2,000 - \$4,300	\$2,000 - \$4,300	\$2,000 - \$4,300	—	\$2,250 - \$5,000	\$2,325 - \$5,000	\$2,000 - \$4,300	\$1,900 - \$4,100
Mammogram (Both breasts)	<b>\$156 - \$263</b>	\$120 - \$260	\$160 - \$350	\$120 - \$260	\$190 - \$410	\$180 - \$400	\$170 - \$370	\$180 - \$390	\$210 - \$450
Abdominal Ultrasound	<b>\$113 - \$208</b>	\$310 - \$675	\$310 - \$675	\$310 - \$675	\$320 - \$700	\$360 - \$775	\$360 - \$800	\$370 - \$800	\$270 - \$575

### Toledo Clinic Imaging/Radiology Locations

**Toledo Clinic Main Campus**  
4235 Secor Rd. | Toledo, OH 43623  
Building 1, Lower Level & Building 3, First Floor  
**Phone:** 419.479.5935 | **Fax:** 419.472.2777

**Holland Sylvania**  
4126 N. Holland-Sylvania Rd., Suite 150 | Toledo, OH 43623  
**Phone:** 419.517.7081 | **Fax:** 419.517.9808

### Toledo Clinic Lab Draw Locations

**Toledo Clinic Main Campus**  
4235 Secor Rd. | Toledo, OH 43623  
Building 1, Lower Level & Building 3, First Floor  
**Phone:** 419.479.5445 | **Fax:** 419.473.2510

**Holland Sylvania**  
4126 N. Holland-Sylvania Rd., Suite 110 | Toledo, OH 43623  
**Phone:** 419.474.2622 | **Fax:** 419.517.0221

**Sylvania**  
7640 W. Sylvania Ave., Suite A2 | Sylvania, OH 43560  
**Phone:** 419.517.4775 | **Fax:** 419.517.7403

**Perrysburg**  
28442 East River Rd., Suite 101 | Perrysburg, OH 43551  
**Phone:** 419.873.6840 | **Fax:** 419.873.6841

\*The Toledo Clinic charge also includes contrast & the radiologist's interpretation fee, which is typically an additional and separate charge for hospital billed services. Not all insurance plans are accepted and patient's price may vary based on their individual insurance plan.

Prices pulled from newchoicehealth.com on 01/15/19.  
Prices are subject to change.