

## SELF PAY LIST

<b>OFFICE VISIT</b>	<b>Amount</b>
Telemedicine Visit	\$50.00
Office Visit NEW/ESTABLISHED	\$120.00
F/U Office Visit W/in 5 days from DOS	\$0.00
F/U Office Visit W/in 2 weeks of DOS	\$60.00
Suture Removal (If not placed here) *INSURANCE CAN NOT BE ACCEPTED*	\$50.00
Oakwood Friends School self-pay	SICK-\$60 Physicals-\$45
<b>Physicals Pricing:</b>	
DOT Physical	\$150.00
Drug Screen (only if required by employer/school)	\$65.00
Physical- work/yearly *over 18*	\$80.00
Fishkill plains PTA Physicals	\$35.00
Physical-Sports, school (price includes vision/hearing test if needed) *under18*	\$45.00
<b>IN ADDITION TO OFFICE VISIT:</b>	
Crutches (patient keeps crutches, do not return)	\$30.00
Any Medication injections	\$25.00
Each lab test [STREP/MONO/PREG/URINE/RSV	\$25.00
Rapid FLU A/B	\$35.00
COVID Sofia Rapid Antigen	\$30.00
COVID Abbott	\$40.00
CEPHEID TRAVEL ONLY -1 HR PCR	\$250.00 *[NO OFFICE VISIT]
CEPHEID SICK/HOSPITAL VISIT/HOSPITAL PROCEDURES- 1 HR PCR	\$60.00 [ PLUS OFFICE VIST]
PCR SEND OUT TO LAB	OFFICE VISIT CHARGE ONLY
Rapid FLU A/B	\$35.00
Ear Irrigation	\$104.00
Blood Draw	\$25.00
EKG	\$55.00
Eye Irrigation	\$60.00
Hearing test	\$30.00
Hep B Vaccine	\$78.00
HIV Rapid test	\$30.00
Nebulizer	\$50.00
Pulmonary Funt. Test(pft) (w/waist up physical and osha form)	\$150.00
Wound care, Sutures, Splints, Etc.	\$80.00
X-ray (each body part)	\$50.00
Vision Test	\$30.00
<b>DOES NOT REQUIRE OFFICE VISIT:</b>	
PPD (SCHOOL OR WORK) (If a pt thinks that have came in contact they need a visit)	\$50.00
FLU VACCINE	\$50.00
TETANUS SHOT -ADULT OVER 18 YRS OLD	\$75.00
TETANUS SHOT -CHILD UNDER 18 YRS OLD	\$50.00