



## SELF-PAY FEE SCHEDULE

A self-pay patient is one who pays in full at the time of the visit for our services and we are not required to file a claim or submit any documentation to a third party. This fee schedule is not offered to patients covered by insurance plans that we are in-network with. Subject to change without prior notice.

### SICK VISIT FEES

Nurse only visit (Blood draw, Vaccination)	\$25.00
Simple Visit (10-15 min with MD)	\$80.00
Detailed Visit (60 min with MD-anxiety; ADHD)	\$160.00

### WELL VISIT FEE

\$150.00  
includes Sports Physical and recommended screening & lab tests for age-appropriate; does not include vaccination or non-recommended lab tests

### LAB TESTS + visit fee

Blood Glucose	\$20.00
Cholesterol Test	\$20.00
Complete Blood Count	\$20.00
Flu Test	\$40.00
Pregnancy Test	\$10.00
RSV Test	\$40.00
Strep Test	\$20.00
TB test	\$15.00
Urinalysis	\$10.00

### VACCINATION + visit fee

Children: each vaccine	\$20.00
Adults:	
Influenza	\$20.00
Tetanus/Whooping Cough	\$40.00

### COMMON PROCEDURES + visit fee

Breathing Treatment	\$25.00
Ear Wax Removal	\$50.00
Foreign Body Removal	\$50.00
Wart Freeze	\$100.00
Burn Care/Abscess I&D	\$100.00

### SCREENING + visit fee

Dental Screening	\$20.00
Hearing Screening	\$20.00
Vision Screening	\$20.00
GoCheck Amblyopia Screening	\$35.00

### OTHER no visit fee

Ear Piercing	\$75.00
Infant Massage Class	\$50.00