



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)	\$25.00
Simple Visit (10-15 min with MD)	\$100.00
Detailed Visit (60 min with MD-anxiety; ADHD)	\$160.00

WELL VISIT FEE

\$160.00
includes Sports Physical and recommended screening & lab tests for age-ask for further details; does not include vaccination or non-recommended lab tests

LAB TESTS + visit fee

COVID 19 Rapid Test	\$75.00
TSH Screen-thyroid	\$20.00
Flu Test	\$40.00
Pregnancy Test	\$10.00
RSV Test	\$40.00
Strep Test	\$20.00
TB test	\$20.00
Urinalysis	\$10.00
Hemoglobin	\$10.00

VACCINATION + visit fee

Each vaccine:	\$20.00
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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 Ambyopia Screening	\$35.00

OTHER no visit fee

Ear Piercing	\$100.00
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