

**Patient Price List**

CPT/HCPCS CODE	Procedure Description	Prompt Pay Price <sup>(1)</sup>	Direct Pay Price <sup>(2)</sup>	Average (Estimated) Total Price <sup>(3)</sup>
93925	Arterial Duplex Extremity Lwr Bilateral	\$ 242	\$ 315	\$ 484
93926	Arterial Duplex Extremity Lwr Uni Ltd	\$ 148	\$ 192	\$ 295
93880	Carotid Doppler Comp	\$ 234	\$ 304	\$ 468
93975	Duplex Scan Arterial Venous, Complete	\$ 234	\$ 304	\$ 468
93976	Duplex Scan Arterial Venous, Limited Study	\$ 234	\$ 304	\$ 468
93970	Duplex Scan Extremity Veins, Comp Bilat	\$ 234	\$ 304	\$ 468
93971	Duplex Scan Extremity Veins, Uni Or Limited	\$ 148	\$ 192	\$ 295
76700	Ultrasound Abdominal Complete	\$ 148	\$ 192	\$ 295
76705	Ultrasound Abdominal, Realtime w/Image Documentation	\$ 148	\$ 192	\$ 295
76775	Ultrasound Aorta/Venacava Ltd	\$ 148	\$ 192	\$ 295
76776	Ultrasound Exam Trans Kidney w/Doppler	\$ 361	\$ 469	\$ 722
76801	Ultrasound Ob < 14WKS	\$ 148	\$ 192	\$ 295
76805	Ultrasound Ob Comp	\$ 148	\$ 192	\$ 295
76815	Ultrasound Ob Ltd/Fetal Position	\$ 96	\$ 124	\$ 191
76856	Ultrasound Pelvic	\$ 148	\$ 192	\$ 295
76857	Ultrasound Pelvis Limited	\$ 308	\$ 400	\$ 615
76872	Ultrasound Prostate	\$ 148	\$ 192	\$ 295
76770	Ultrasound Retroperitoneal, Renal, Aorta, Complete	\$ 148	\$ 192	\$ 295
76536	Ultrasound Soft Tissue Neck/Head	\$ 148	\$ 192	\$ 295
76870	Ultrasound Testicular	\$ 148	\$ 192	\$ 295
76830	Ultrasound Transvaginal	\$ 148	\$ 192	\$ 295
76817	Ultrasound Transvaginal Ob	\$ 96	\$ 124	\$ 191
76882	Ultrasound Xtr Non-Vascular Limited	\$ 191	\$ 248	\$ 382

**The above prices are for radiological procedures performed at HonorHealth Outpatient Medical Imaging Centers. Prices listed do not include professional fees for services of hospital based Radiologists.**

- <sup>(1)</sup> **Prompt Pay Price** is the average price a self-pay patient will pay when paid-in-full in advance of having this procedure. This price is also available for emergency services, with no inpatient admission, if paid-in-full within 14 days of hospital visit.
- <sup>(2)</sup> **Direct Pay Price** is the average price a self-pay patient will pay when having this procedure. Arrangements can be made to pay over time.
- <sup>(3)</sup> **Average (Estimated) Total Price** is the estimated average total charges a person will experience when having this procedure.
- <sup>(4)</sup> Not all services provided at all locations.

**Glendale Health & Infusion Center**

X-Ray • Ultrasound • Infusions

**6220 W. Bell Rd Suite 110**

**Glendale, AZ 85308**

**T: 602.547.7200**

**Anthem Outpatient Medical Imaging**

X-Rays Only

**3648 W. Anthem Way Building A-100**

**Anthem, AZ 85086**

**T: 623.434.6474**

**Deer Valley Outpatient Medical Imaging**

X-Ray • Dexa • Ultrasound • CT • MRI

**19636 N. 27th Ave. Suite LL1**

**Phoenix, AZ 85027**

**T: 623.445.6400**

**John C. Lincoln Outpatient Medical Imaging**

X-Ray • Dexa • Ultrasound • CT • MRI

**9250 N. Third St. Suite 1002**

**Phoenix, AZ 85020**

**T: 602.331.7890**

**Sonoran Health**

X-Ray • Dexa • Ultrasound • CT • MRI

**33423 N. 32nd Ave**

**Phoenix, AZ 85035**

**T: 623.474.1610**

**Tatum Outpatient Medical Imaging**

X-Ray • Ultrasound • CT • MRI

**18404 N. Tatum Blvd. Suite 103**

**Phoenix, AZ 85032**

**T: 602.485.7490**

**Breast Health & Research Center**

Mammograms • Ultrasound • MRI

**19646 N. 27th Ave., Suite 205**

**Phoenix, AZ 85027**

**T: 623.780.HOPE (4673)**