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**HAMDEN**  
Whitney Medical Center  
2447 Whitney Avenue  
203-288-7975  
Fax 203-288-1012

**BRANFORD**  
Stony Creek Medical Bldg.  
6 Business Park Drive  
203-481-5397  
Fax 203-483-8322

**NEW HAVEN**  
Sherman Medical Building  
136 Sherman Avenue  
203-777-5447  
Fax 203-777-5449

**PRICE LIST FOR EXAMS/PROCEDURES**

**DIGITAL MAMMOGRAPHY**

*Branford and Hamden offices*

Screening.....	225.00
Diagnostic .....	225.00
Unilateral.....	195.00
Magnification/Additional Views .....	195.00
CAD .....	35.00

**ANALOG MAMMOGRAPHY**

*New Haven Office Only*

Screening.....	175.00
Diagnostic .....	175.00
Unilateral.....	150.00
Magnification/ Views .....	150.00
CAD .....	35.00

**CT SCAN**

Pulmonary Angiography (P.E. Study).....	800.00
Chest .....	625.00 - 730.00
Abdomen.....	645.00 - 730.00
Pelvis.....	645.00 - 730.00
Brain.....	520.00 - 680.00
Temporal Bones .....	530.00 - 670.00
Neck Soft Tissues.....	605.00 - 685.00
Pituitary/Orbits/Ears .....	600.00 - 670.00
Cervical Spine.....	625.00 - 715.00
Thoracic Spine .....	600.00 - 715.00
Lumbar Spine.....	625.00 - 730.00
Flank Protocol (CT KUB)	
Abdomen/Pelvis w/o contrast.....	1290.00
CT IVP	
Abdomen Pelvis w/further sections.....	1460.00
Upper Extremity.....	490.00
Lower Extremity .....	730.00

**FLUOROSCOPY**

Barium Enema .....	265.00
Barium Enema w/ air .....	315.00
Esophogram (Barium Swallow).....	210.00
Upper GI series .....	260.00
Small Bowel only.....	220.00
Upper GI & Small Bowel Series.....	320.00
IVP .....	260.00

**BONE DENSITY**

Osteoporosis Screening.....	190.00
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**SPECIAL PROCEDURES**

Hysterosalpingogram .....	270.00
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**DIAGNOSTIC X-RAY**

Sinuses .....	98.00
Chest, PA and LAT .....	79.00
KUB	
1 film abdomen.....	85.00
2-way abdomen .....	115.00
Pelvis.....	85.00
Scoliosis Series .....	198.00
Cervical Spine.....	148.00
Dorsal Spine.....	92.00
Lumbar Spine.....	146.00
Upper Extremity.....	85.00
Lower Extremity .....	85.00

**ULTRASOUND**

Abdomen.....	288.00
Aortic .....	220.00
Renal .....	220.00
Breast .....	126.00
Scrotum.....	260.00
Prostate.....	260.00
Thyroid.....	205.00
Pelvic.....	257.00
Transvaginal.....	160.00

**VASCULAR STUDIES**

Carotid Doppler .....	325.00
Extremity, Venous/ Arterial	
One side.....	325.00
Two sides.....	450.00

**For more information regarding specific charges  
please call our Billing Office: 203-315-3326**

*We accept MasterCard, VISA, American Express and Discover.  
Co-Pays for CT Scans are expected at the time of visit.*