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Ultrasound Imaging Pricing

Note: Pricing includes everything including the radiologist's reading fee. No surprise billing.

Code	Description	Pricing
76506	ECHOENCEPHALOGRAPHY	\$364.30
76536	US NECK, THYROID/PARATHYROID, AND SOFT TISSUE	\$357.80
76604	US SOFT TISSUE - CHEST WALL	\$328.19
76641	BREAST ULTRASOUND COMPLETE- LEFT/RIGHT	\$331.77
76642	BREAST ULTRASOUND LIMITED- LEFT/RIGHT	\$302.50
76700	US ABDOMEN-COMplete	\$377.31
76705	US ABDOMEN-LIMITED-SINGLE ORGAN/QUADRANT	\$303.88
76706	ABDOMINAL AORTA, REAL TIME WITH IMAGE DOCUMENTATION	\$327.25
76770	US RETROPERITONEAL COMPLETE-RENAL	\$351.30
76775	US RETROPERITONEAL LIMITED	\$257.13
76801	OB US UTERUS, YOUNGER THAN 14 WEEKS	\$377.31
76805	OB US UTERUS 14 WEEKS OR OLDER	\$467.50
76810	OB UTERUS TWINS	\$286.23
76815	OB US LIMITED FETAL STUDY	\$260.22
76816	OB US FOLLOW UP-FETAL GROWTH	\$357.80
76817	OB UTERUS TRANSVAGINAL US	\$327.25
76819	BIOPHYSICAL US PROFILE SCORE	\$303.88
76820	US CORD DOPPLER	\$233.75
76830	US TRANSVAGINAL	\$377.31
76856	US PELVIC	\$338.27



Code	Description	Pricing
76857	US PELVIC LIMITED NON OB	\$257.13
76870	US SCROTUM	\$350.63
76872	US PROSTATE	\$198.66
76881	EXT, NON VASCULAR US, SOFT TISSUECOMPLETE- LEFT/RIGHT	\$327.25
76882	US EXTREMITY,NON VASCULAR- LEFT/RIGHT	\$303.88
76942	US GUIDE FOR NEEDLE PLACEMENT	\$195.16
93306	TRANSTHORACIC ECHOCARDIOGRAPHY;REAL-TIME (2D)IMAG	\$650.53
93880	BILATERAL CAROTID-NON-INVASIVE DUPLEX US	\$631.02
93882	UNILATERAL CAROTID- LEFT/RIGHT	\$374.00
93886	TRANSCRANIAL DOPPLER US	\$622.35
93888	TRANSCRANIAL DOPPLER EVALUATION LTD	\$302.15
93922	ABI -SINGLE LEVEL(UPPER/LOWER)-BILATERAL	\$350.63
93923	FULL BILATERAL ARTERIAL ABI	\$371.20
93925	EXTREMITY ARTERIES US - BILATERAL LOWER	\$806.65
93926	EXTREMITY ARTERIES US-UNILATERAL LOWER- LEFT/RIGHT	\$481.39
93930	EXTREMITY ARTERIES-BILATERAL UPPER	\$650.53
93931	ARTERIAL UNILATERAL UPPER EXT- LEFT/RIGHT	\$330.99
93970	EXTREMITY VEINS US LOWER BILATERAL	\$611.50
93971	EXTREMITY VEINS US-UNILATERAL UPPER- LEFT/RIGHT	\$377.31
93975	COMPLETE DOPPLER STUDY	\$545.11
93976	VASCULAR OVARIAN DOPPLER - LIMITED	\$507.42
93978	AAA OR IVC US	\$397.38
93979	DUPLEX US SCAN;AORTA, INFERIOR VENA CAVA, ILIAC VASC	\$170.03

