

**Baguio General Hospital and Medical Center
Rates and Fees**

CT SCAN

3D FACIAL and HEAD CT SCAN	4,500.00
3D FACIAL HEAD PLAIN and CONTRAST	6,000.00
ABDOMEN AORTOGRAM CT SCAN	9,500.00
ABDOMEN PANCREATIC PROTOCOL CT SCAN	15,000.00
ABDOMEN PLAIN and CONTRAST adult CT SCAN	10,500.00
ABDOMEN PLAIN and CONTRAST child CT SCAN	9,500.00
ABDOMEN PLAIN CT SCAN	6,000.00
ADDITIONAL CONTRAST STUDY	3,000.00
CAROTID / NECK ANGIOGRAM	9,500.00
CEREBRAL ANGIOGRAM / VENOGRAM STUDY CT SCAN	9,500.00
CHEST/THORACIC PLAIN and CONTRAST CT SCAN	8,000.00
CHEST/THORACIC PLAIN CT SCAN	6,000.00
CT GUIDED BIOPSY w/ previous scan CT SCAN	2,000.00
CT GUIDED BIOPSY w/o previous scan CT SCAN	4,000.00
EXTREMITIES PLAIN and CONTRAST CT SCAN	8,000.00
EXTREMITIES PLAIN CT SCAN	5,000.00
HEAD AND NECK/CERVICAL PLAIN and CONTRAST CT SCAN	11,300.00
HEAD AND NECK/CERVICAL PLAIN CT SCAN	8,700.00
HEAD PLAIN and CONTRAST CT SCAN	5,300.00
HEAD PLAIN CT SCAN	4,200.00
HEAD w/ ORBITS/PNS/TEMPORAL PLAIN and CONTRAST CT SCAN	10,000.00
HEAD w/ ORBITS/PNS/TEMPORAL PLAIN CT SCAN	6,000.00
LOWER ABDOMEN PLAIN and CONTRAST CT SCAN	6,000.00
LOWER ABDOMEN PLAIN CT SCAN	4,500.00
LUMBAR PLAIN and CONTRAST CT SCAN	8,000.00
LUMBAR PLAIN CT SCAN	5,000.00
MANDIBLE/PAROTID/ORAL PLAIN and CONTRAST CT SCAN	5,500.00
MANDIBLE/PAROTID/ORAL PLAIN CT SCAN	4,000.00
MASTOID/TEMPORAL PLAIN and CONTRAST CT SCAN	5,500.00
MASTOID/TEMPORAL PLAIN CT SCAN	4,700.00
MESENTERIC ANGIOGRAM	15,000.00
NECK / NASOPHARYNX/OROPHARYNX PLAIN and CONTRAST CT SCAN	6,000.00
NECK/NASOPHARYNX/OROPHARYNX PLAIN CT SCAN	4,500.00
ORBIT PLAIN and CONTRAST CT SCAN	6,000.00
ORBIT PLAIN CT SCAN	4,700.00
PARANASAL PLAIN and CONTRAST CT SCAN	5,500.00
PARANASAL PLAIN CT SCAN	2,913.00
PELVIS/HIP PLAIN and CONTRAST CT SCAN	6,000.00
PELVIS/HIP PLAIN CT SCAN	4,500.00
PERIPHERAL ANGIOGRAM CT SCAN	18,500.00

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CT SCAN

PROCEDURE ONLY THORACIC AORTOGRAM	7,600.00
RENAL ANGIOGRAM	9,500.00
STONOGRAM CT SCAN	5,000.00
THORACIC AORTOGRAM/PULMONARY ANGIO CT SCAN	9,500.00
THORACOABDOMINAL AORTOGRAM CT SCAN	18,500.00
TRIPHASIC LIVER / PANCREATIC PROTOCOL UPPER AB CT SCAN	11,000.00
TRIPHASIC/PANCREATIC ABDOMEN CT SCAN	15,000.00
UPPER ABDOMEN PLAIN and CONTRAST CT SCAN	6,000.00
UPPER ABDOMEN PLAIN CT SCAN	4,500.00
UROGRAM CT SCAN	8,000.00
VISIPAQUE ABDOMEN AORTOGRAM	7,601.00
VISIPAQUE ABDOMEN child PLAIN & CONTRAST CT SCAN	8,553.00
VISIPAQUE ABDOMEN PANCREATIC/ADRENAL PROTOCOL CT SCAN	13,101.00
VISIPAQUE ABDOMEN PLAIN and CONTRAST adult CT SCAN	8,601.00
VISIPAQUE ANGIOGRAM STUDY CT SCAN	7,601.00
VISIPAQUE CHEST PLAIN & CONTRAST CT SCAN	7,053.00
VISIPAQUE CONTRAST 1 BOTTLE	3,148.00
VISIPAQUE CONTRAST 2 BOTTLES	6,296.00
VISIPAQUE EXTREMITIES PLAIN AND CONTRAST	7,053.00
VISIPAQUE HEAD + NECK PLAIN AND CONTRAST	10,353.00
VISIPAQUE HEAD + ORBITS/TEMP/PNS PLAIN AND CONTRAST	9,053.00
VISIPAQUE HEAD PLAIN & CONTRAST CT SCAN	4,353.00
VISIPAQUE IODIXANOL 3 BOTTLES	9,444.00
VISIPAQUE LOWER ABDOMEN PLAIN AND CONTRAST	5,053.00
VISIPAQUE LUMBAR PLAIN AND CONTRAST	7,053.00
VISIPAQUE MANDIBLE/PAROTID/ORAL PLAIN AND CONTRAST	4,553.00
VISIPAQUE MASTOID/TEMPORAL PLAIN AND CONTRAST	4,553.00
VISIPAQUE MESSENTERIC ANGIOGRAM	13,101.00
VISIPAQUE NECK/CERVICAL PLAIN and CONTRAST CT SCAN	5,053.00
VISIPAQUE ORBITS PLAIN and CONTRAST	5,053.00
VISIPAQUE PARANASAL PLAIN AND CONTRAST	4,553.00
VISIPAQUE PELVIS/HIP PLAIN AND CONTRAST	5,053.00
VISIPAQUE PERIPHERAL ANGIOGRAM CT SCAN	16,596.00
VISIPAQUE RENAL ANGIOGRAM	16,600.00
VISIPAQUE THORACIC AORTOGRAM/PULMO ANGIO	7,601.00
VISIPAQUE THORACOABDOMEN AORTOGRAM	16,601.00
VISIPAQUE TRIPHASIC LIVER	9,101.00
VISIPAQUE UROGRAM CT SCAN	7,053.00