SAINT GABRIEL MEDICAL CENTER, INC. BORACAY

Manoc-Manoc Boracay Island Malay Aklan Tel:(036)288-9911

TABLE OF CHARGES In-Patient

	IADLE	OF CHARGES				
ID	DESCRIPTION	In-Patient	OPD	Caritas HMO-OPD	In-Patient Cash	HMO OPD
ID	DESCRIPTION			ПМО-ОРО	Casii	OPD
•	ment : EMERGENCY ROOM ry : ER - CHARGES					
10002	Admin Fee	1.00	1.00	1.00	1.00	1.00
6376	admin fee	250.00	250.00	250.00	250.00	250.00
8906	Admission Kit	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00
8751	Ambulance Fee	600.00	600.00	600.00	600.00	600.00
8750	Ambulance Fee within Kalibo Area	3,000.00	700.00	500.00	3,000.00	3,000.00
8003	Ambulance from Kalibo to Caticlan	-	500.00	-	-	-
8610	Ambulance from Numancia to Kalibo	600.00	600.00	600.00	600.00	600.00
8226	Bath Towel	150.00	150.00	150.00	150.00	150.00
8165	Bed Pan	150.00	150.00	150.00	150.00	150.00
8222	Beddings Out	620.00	620.00	620.00	620.00	620.00
5531	Cardiac Monitor (First 2 hours)	500.00	500.00	500.00	500.00	500.00
5529	Cardiac Monitor (succeeding hour)	250.00	250.00	250.00	250.00	250.00
6240	Cardiac Monitor with Pulse Oximeter	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00
10023	CASTING	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00
8173	Catheter Stabilization / Charge	23.50	23.50	23.50	23.50	23.50
8172	Catheter Stabilization / Each	20.25	20.25	20.25	20.25	20.25
9990	CBG	181.50	181.50	181.50	181.50	181.50
8176	Chest Connector / Charge	155.55	155.55	155.55	155.55	155.55
8175	Chest Connector / Each	135.00	135.00	135.00	135.00	135.00
8163	Cholecystectomy Gauze	40.00	40.00	40.00	40.00	40.00
9995	CONDUCTION A	7,000.00	7,000.00	7,000.00	7,000.00	7,000.00
10055	CONDUCTION A (PM)	10,000.00	10,000.00	10,000.00	10,000.00	10,000.00
10038	CONDUCTION A (TOXIC/INTUBATED)	10,000.00	10,000.00	10,000.00		10,000.00
10056	CONDUCTION A (TOXIC/INTUBATED) (PM)	13,000.00	13,000.00	13,000.00		13,000.00
10037	CONDUCTION B	10,000.00	10,000.00	10,000.00		10,000.00
10057	CONDUCTION B (PM)	13,000.00	13,000.00	13,000.00	-	13,000.00
10039	CONDUCTION B (TOXIC/INTUBATED)	13,000.00	13,000.00	13,000.00		13,000.00
	CONDUCTION B (TOXIC/INTUBATED) (PM)		15,000.00			15,000.00
10007	CONSULTATION (FOLLOW UP)	300.00	300.00	300.00	300.00	300.00
10006	CONSULTATION (HMO)	400.00	400.00	400.00	400.00	400.00
8160	Cotton Sterile	40.00	40.00	40.00	40.00	40.00
10102	CRF FEE	200.00	200.00	200.00	200.00	200.00
5935	CTG	1,300.00	1,300.00	1,300.00	1,300.00	1,300.00
5535	Defibrilator	2,500.00	2,500.00	2,500.00	2,500.00	2,500.00
	DISINFECTION	500.00	500.00	500.00	500.00	500.00
4233	Doctor's Fee	500.00	500.00	500.00	500.00	500.00
8147	Doctors Fee	5,000.00	5,000.00	5,000.00	5,000.00	5,000.00
8075	Driver's Fee after 5PM (ILOILO AND ROXAS)	3,000.00	1,000.00	3,000.00	3,000.00	
8077	Driver's Fee after 5PM (within AKLAN)		1,000.00	_	_	
10010	Ear Flushing	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
7710	ECG 12 LEADS PRINT/HARD COPY	500.00	500.00	500.00	500.00	500.00
8968	ECG 12 LEADS PRINT/HARD COPY ECG 12 LEADS PRINT/HARD COPY (APE)					
7711	ECG 15 LEADS PRINT/HARD COPY ECG 15 LEADS PRINT/HARD COPY	350.00 500.00	350.00 500.00	350.00 500.00	350.00 500.00	350.00 500.00

Last i c	ge Department EMERGENET ROOM	In-Patient	OPD	Caritas	In-Patient	НМО
ID	DESCRIPTION			HMO-OPD	Cash	OPD
7712	ECG long LEAD 2 PRINT/HARD COPY	500.00	500.00	500.00	500.00	500.00
8987	ELBOW FLUID ASPIRATION	1,200.00	1,200.00	1,200.00	1,200.00	1,200.00
6238	ELECTRODES	70.00	70.00	70.00	70.00	70.00
4248	ER Catheter Insertion	500.00	500.00	500.00	500.00	500.00
10060	ER Consultation Fee A (4PM TO 7AM)	800.00	800.00	800.00	800.00	800.00
4249	ER Consultation Fee A (7AM TO 4PM)	600.00	600.00	600.00	600.00	600.00
10061	ER Consultation Fee B (4PM TO 7AM)	1,100.00	1,100.00	1,100.00	1,100.00	1,100.00
10046	ER Consultation Fee B (7AM TO 4PM)	800.00	800.00	800.00	800.00	800.00
8967	ER FEE (Succeding Hours)	500.00	500.00	500.00	500.00	500.00
5936	ER FEE A	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00
8078	ER FEE B	2,500.00	2,500.00	2,500.00	2,500.00	2,500.00
8983	ET Intubation	2,500.00	2,500.00	2,500.00	2,500.00	2,500.00
8223	Extra Beddings-In (Top Sheet/Fitted)	100.00	100.00	100.00	100.00	100.00
10034	EYE Flushing	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
6223	EYE SHEET	250.00	250.00	250.00	250.00	250.00
8736	Face Mask N95	68.00	68.00	68.00	68.00	68.00
10049	FOLEY CATHETER INSERTION	500.00	500.00	500.00	500.00	500.00
10004	Follow Up Check-up	300.00	300.00	300.00	300.00	300.00
8627	Formalin 25ml (S)	50.00	50.00	50.00	50.00	50.00
8159	Gauze 4x4	100.00	100.00	100.00	100.00	100.00
10113	HOLDING ROOM	5,000.00	5,000.00	5,000.00	5,000.00	5,000.00
10044	HOUSE CALL A	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00
10045	HOUSE CALL B	5,000.00	5,000.00	5,000.00	5,000.00	5,000.00
8969	House Call Services (Package)	5,000.00	5,000.00	5,000.00	5,000.00	5,000.00
8979	I & D	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
8174	I.V Luer Lock Connector / Charge	23.50	23.50	23.50	23.50	23.50
10051	INCISION AND DRAINAGE/WOUND DEBRIDEMENT	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
6312	Infusion Pump	700.00	700.00	700.00	700.00	700.00
6313	INFUSION PUMP + BT	150.00	150.00	150.00	150.00	150.00
10047	INTUBATION/CPR	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00
10005	ISOLATION KIT	350.00	350.00	350.00	350.00	350.00
10000	ISOLATION KIT	350.00	350.00	350.00	350.00	350.00
8179	Isolation Pact	150.00	150.00	150.00	150.00	150.00
6378	Isordel 5mg	29.75	29.75	29.75	29.75	29.75
10114	IUD REMOVAL	2,500.00	2,500.00	2,500.00	2,500.00	2,500.00
8607	Ivent Tubings	3,800.00	3,800.00	3,800.00	3,800.00	3,800.00
8606	Ivent Ventilator	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00
8170	Kendal Respiflo / Each	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00
8171	Kendal Respiflo / Set	1,800.00	1,800.00	1,800.00	1,800.00	1,800.00
8682	LUCAS CPR	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00
6224	MAYO COVER	150.00	150.00	150.00	150.00	150.00
10054	MEDICAL ABSTRACT	200.00	200.00	200.00	200.00	200.00
8977	Medical Certificate	200.00	200.00	200.00	200.00	200.00
5969	minor set	550.00	550.00	550.00	550.00	550.00
5937	nebulization	150.00	150.00	150.00	150.00	150.00
5534	nebulization (w/ own nebulizer)	75.00	75.00	75.00	75.00	75.00
10053	NEWBORN CARE/CATCH (ROD)	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00
10048	NGT INSERTION	500.00	500.00	500.00	500.00	500.00
8166	Non-Sterile Kidney Basin	15.00	15.00	15.00	15.00	15.00

	DECCRIPTION	In-Patient	OPD	Caritas HMO-OPD	In-Patient Cash	HMO OPD
ID 8986	DESCRIPTION Number 500	1 000 00 1	000.00			
	Nurse Fee	800.00	800.00	800.00	800.00	800.00
10001	Nurse's Fee	1.00	1.00	1.00	1.00	1.00
	ON CALL FEE	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
10059	OPAT FEE	500.00	500.00	500.00	500.00	500.00
10062	OPAT FEE (succeeding)	300.00	300.00	300.00	300.00	300.00
10043	OPD (GYNE FOLLOW UP)	500.00	500.00	500.00	500.00	500.00
10042	OPD (GYNE)	800.00	800.00	800.00	800.00	800.00
10116	OPD (PRENATAL FOLLOW UP)	400.00	400.00	400.00	400.00	400.00
10041	OPD (PRENATAL)	700.00	700.00	700.00	700.00	700.00
10040	OPD CONSULTATION (PEDIA)	800.00	800.00	800.00	800.00	800.00
4373	OPD-Consultation Fee	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00
5954	OPD-Consultation Fee	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
8181	Original Faucet	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00
10112	ORTHOPEDIC PROCEDURE	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
6094	OS 4x4	80.00	80.00	80.00	80.00	80.00
7746	oxygen	2.50	2.50	2.50	2.50	2.50
10033	OXYGEN GAUGE RENTAL	2,500.00	2,500.00	2,500.00	2,500.00	2,500.00
8225	Patient Gown	300.00	300.00	300.00	300.00	300.00
8162	Peanut	40.00	40.00	40.00	40.00	40.00
8182	Perilight	200.00	200.00	200.00	200.00	200.00
8185	PHACO-In System	4,040.00	4,040.00	4,040.00	4,040.00	4,040.00
8184	PHACO-Out	5,200.00	5,200.00	5,200.00	5,200.00	5,200.00
10011	Physical Exam (APE)	1,493.50	1,493.50	1,493.50	1,493.50	1,493.50
8224	Pillow Case (Extra)	50.00	50.00	50.00	50.00	50.00
8688	Pink Pillow (500g)	500.00	500.00	500.00	500.00	500.00
10013	PPE	800.00	800.00	800.00	800.00	800.00
10018	PPE AND PROFESSIONAL FEE	1,540.00	1,540.00	1,540.00	1,540.00	1,540.00
10066	PREGNANCY PACKAGAE	999.00	999.00	999.00	999.00	999.00
6014	Pulse Oximeter Check	300.00	300.00	300.00	300.00	300.00
5537	Pulse Oximeter Check (per hour)	20.83	20.83	20.83	20.83	20.83
6015	Pulse Oximeter per day	800.00	800.00	800.00	800.00	800.00
7605	Pulse Oximeter Sensore (Adult)	850.00	850.00	850.00	850.00	850.00
8573	Pulse Sensor (Adult)	1,319.63	1,319.63	1,319.63	1,319.63	1,319.63
8572	Pulse Sensor (Pedia)	1,164.38	1,164.38	1,164.38	1,164.38	1,164.38
5953	Pulse Sensore (Adult)	850.00	850.00	850.00	850.00	850.00
8178	Rebreathing 02 Mask w/ Ballon/Bag In-Patient	206.75	206.75	206.75	206.75	206.75
	Set					
8177	Rebreathing 02 Mask w/ Ballon/Bag Out-Patient Set	179.75	179.75	179.75	179.75	179.75
10009	Removal of Foreign Body	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00
8867	Resuscitation bag adult disposable	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00
9991	Ring Removal	-	_	-	-	
8158	Roll Gauze	70.00	70.00	70.00	70.00	70.00
8167	Shiley #4	4,387.00	4,387.00	4,387.00	4,387.00	4,387.00
8168	Shiley #6	4,387.00	4,387.00	4,387.00	4,387.00	4,387.00
10035	SHOULDER REDUCTION	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
6357	Solumedrol 40mg / vial	872.50	872.50	872.50	872.50	872.50
6460	Sponge	100.00	100.00	100.00	100.00	100.00
6393	STERILE BOTTLE (1000ml)	150.00	150.00	150.00	150.00	150.00
6392	STERILE BOTTLE (1000mm)	75.00	75.00	75.00	75.00	75.00
	D. L. W. L. DOTT LE (300)	, 5.00	, 5.00	, 5.00	, 5.00	, 5.00

Last F	ige Department Link Gener Room					
		In-Patient	OPD	Caritas	In-Patient	HMO
ID	DESCRIPTION			HMO-OPD	Cash	OPD
6319	Sterile Kidney Basin	50.00	50.00	50.00	50.00	50.00
8161	Sterile Water	30.00	30.00	30.00	30.00	30.00
6356	Succeeding hours (1hour)	100.00	100.00	100.00	100.00	100.00
5938	Suction Machine (First Hour)	250.00	250.00	250.00	250.00	250.00
5939	Suction Machine (Succeeding Hour)	100.00	100.00	100.00	100.00	100.00
9989	SUTURE REMOVAL	500.00	500.00	500.00	500.00	500.00
10063	SUTURE REMOVAL - OUT (1st 6")	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
10064	SUTURE REMOVAL - OUT (6" +)	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00
8978	Suturing	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
8169	T-Piece	265.00	265.00	265.00	265.00	265.00
8180	Thora Battle	150.00	150.00	150.00	150.00	150.00
8988	Transportation	300.00	300.00	300.00	300.00	300.00
4474	Trauma Fee	800.00	800.00	800.00	800.00	800.00
4475	Trauma Fee (succeeding hours)	150.00	150.00	150.00	150.00	150.00
8737	Tubings	1,800.00	1,800.00	1,800.00	1,800.00	1,800.00
8984	Ungiectomy	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
10052	UNGIECTOMY	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00
8164	VR IVENT-201 (Machine)	1,800.00	1,800.00	1,800.00	1,800.00	1,800.00
8687	White Magic Pillow	250.00	250.00	250.00	250.00	250.00
8517	Woolen Blanket (Not return)	500.00	500.00	500.00	500.00	500.00
8516	Woolen Blanket (Per use)	15.00	15.00	15.00	15.00	15.00
9998	Wound Dressing Fee	500.00	500.00	500.00	500.00	500.00
10050	WOUND SUTURING	1,500.00	1,500.00	1,500.00	1,500.00	1,500.00