| OUTPATIENT RATES                                      | NON-RESIDENTS<br>OF CANADA                       |           |
|---|--|-----------|
| Out-Patient visits (per visit)                        | \$   | 184.00    |
| Emergency visits (per visit)                          | \$   | 297.00    |
| Radiology (per unit)                                  | \$   | 12.40     |
| Laboratory (per unit)                                 | \$   | 9.00      |
| Electrocardiograph (E.C.G.) (per exam - Pediatric)    | \$   | 448.00    |
| Electrocardiograph (E.C.G.) (per exam - Adult)        | \$   | 172.00    |
| Electroencephalograph (E.E.G.) (per exam - Pediatric) | \$ | 1,123.00  |
| Electroencephalograph (E.E.G.) (per exam - Adult)     | \$   | 695.00    |
| Speech Therapy (patient attendances - Pediatric)      | \$   | 1,263.00  |
| Speech Therapy (patient attendances - Adult)          | \$   | 797.00    |
| PET-CT Scan   | \$   | 3,437.00  |
| Respiratory Therapy (per treatment)                   | \$   | 335.00    |
| Renal Dialysis (per treatment)                        | \$   | 1,545.00  |
| Surgical Day Care - Low                               | \$   | 2,578.00  |
| Surgical Day Care - Medium                            | \$   | 9,961.00  |
| Surgical Day Care - High                              | \$   | 35,436.00 |
| Psychiatric Day Care                                  | \$   | 875.00    |
| Pulmonary Function Testing (per test)                 | \$   | 146.00    |
| Non-Stress Test                                       | \$   | 313.00    |
| Stress Test   | \$   | 884.00    |
| Magnetic Resonance Imaging (MRI)                      | \$   | 1,677.00  |
| Computerized Axial Tomography (CAT Scan)              | \$   | 1,993.00  |
| Autopsy   | \$   | 3,648.00  |
| Audiology (Patient attendance - Pediatric)            | \$   | 714.00    |
| Audiology (Patient attendance - Adult)                | \$   | 326.00    |
| Orthoptics (per treatment)                            | \$   | 291.00    |
| Lithotripsy (per procedure)                           | \$   | 3,278.00  |
|   | \$904 + (2.65 x cost                             |           |
| Chemotherapy (per treatment)                          | of drug  | •         |
| Radiotherapy (per treatment)                          | \$   | 1,224.00  |
| Electromyography (E.M.G.) (per exam - Adult)          | \$   | 695.00    |
| Electromyography (E.M.G.) (per exam - Pediatric)      | \$   | 1,124.00  |

<sup>\*\*</sup>Hospital services may be billed separately from physician charges\*\*