



Patient Discounted Fee Schedule

For Patients Without Insurance

Mid America Clinical Laboratories is now offering discounted laboratory fees for self-pay patients at our Patient Care Centers (PCCs). As part of this offering, we have implemented a policy for payment up to \$150.00 at the time of service. Any remaining balance will be billed directly to the patient.

We will accept personal checks, money orders, Visa, MasterCard or American Express. For the safety of everyone, cash will not be accepted.

Lab tests collected at our PCCs are eligible for the discounted prices. It will be the responsibility of the patient to bring the in-office collected specimens to our PCCs for processing and payment.

TEST NAME	TEST CODE	FEE
AB SCR RFX ID/TITER	795	\$20.00
ABO GROUP & RH TYPE	7788	\$25.00
ADULT FOOD ALLERGY PANEL	10715	\$180.00
ALBUMIN	223	\$15.00
ALLERGY REGION 5 PANEL	51315	\$370.00
ALT	823	\$15.00
AMYLASE	243	\$22.53
ANA TITER & PATTERN	36209	\$32.00
ANA W/REFLEX	249	\$20.00
ANTI DSDNA AB, EIA	255	\$39.00
AST	822	\$15.00
BASIC METABOLIC PANEL	10165	\$20.58
BRAIN NATRI, PEPTIDE	37386	\$85.20
BV & VAGINOSIS SCR, DNA	14577	\$140.00
C DIFF TOXIN A & B	37212	\$25.00
CA 125	29256	\$55.00
CA 27-29	29493	\$73.08
CALCIUM	303	\$15.00
CALCIUM, IONIZED	306	\$15.00
CARDIO CRP	10124	\$30.00
CBC (DIFF/PLT)	6399	\$19.00
CBC (DIFF/PLT) W/SMEAR REVIEW	20253	\$20.16
CBC (H/H, RBC, WBC, PLT)	1759	\$17.00
CEA	978	\$30.00
CELIAC DISEASE COMP	19955	\$112.14
CF CARRIER SCREEN	10458	\$357.00
CHOLESTEROL, TOTAL	334	\$6.40
CK, TOTAL	374	\$14.00
COMP METABOLIC PANEL	10231	\$25.71
CORTISOL, A.M.	4212	\$21.00
CORTISOL, TOTAL	367	\$21.00
C-PEPTIDE	372	\$85.05
CREATININE CLEARANCE	7943	\$23.00
CREATININE W/EGFR	11360	\$15.75
CRP	4420	\$33.09
CT/NG DNA, SDA, OTV	11363	\$96.00
CULTURE, AEROBIC BACTERIA	4550	\$40.95
CULTURE, BLOOD	389	\$51.03
CULTURE, GENITAL	4558	\$20.00

TEST NAME	TEST CODE	FEE
CULTURE, GP. A STREP	4485	\$25.00
CULTURE, THROAT	394	\$35.91
CULTURE, URINE ROUTINE	395	\$25.00
CULTURE, AEROBIC/ANAEROBIC	4446	\$35.00
CULTURE, STOOL (S/S/C)	10045	\$57.03
DHEA-SULFATE	402	\$50.00
DIRECT LDL	8293	\$23.00
DRAW FEE, PCC SPECIMEN	3259	\$5.00
EBV AB SCREEN	6421	\$75.00
ELECTROLYTE PANEL	34392	\$17.15
ESTRADIOL, ORAL HRT	429	\$55.00
FERRITIN	457	\$25.00
FOLATE, SERUM	466	\$47.85
FSH	470	\$30.00
GAMMA, GLUT TRANSPEP	482	\$15.00
GLUCOSE, GEST. SCREEN	8477	\$11.00
GLUCOSE, PLASMA	484	\$15.00
GLUCOSE, SERUM	483	\$15.00
GRP A STREP PROBE	14565	\$67.53
HANDLING CHARGE	3251	\$28.59
HCG, SERUM, QUAL	8435	\$13.75
HCG, SERUM, QUANT	8396	\$15.00
HEMOGLOBIN A1C	496	\$20.00
HEP B SURFACE AB QL	499	\$23.00
HEP B SURFACE AB QN	8475	\$25.00
HEP B SURFACE AG	498	\$15.00
HEP C AB	8472	\$25.00
HEP C AB W/REFLES	2960	\$67.20
HEP PANEL ACUTE W/REF	10306	\$159.25
HEPATIC FUNCTION PANEL	10256	\$19.71
HETEROPHILE, MONO	654	\$12.00
HGB & HCT	7998	\$12.00
HIV 1/2 AB SCREEN W/REFLEX	91431	\$25.00
HOMOCYSTEINE, CARDIO	31789	\$30.00
HPV HR	90887	\$51.30
HSV 1/2 HERPESELECT	6447	\$72.00
IMAGE ASSISTED THIN PREP PAP	51549	\$37.50
IMAGE ASSISTED THIN PREP NO HPV	51179	\$37.50
IMAGE ASSISTED THIN PREP W/HPV	51548	\$88.80

Patient Discounted Fee Schedule (Continued)

TEST NAME	TEST CODE	FEE
IMMUNOFIXATION, SERUM	549	\$95.76
IMMUNOGLOBULIN GAM	7083	\$86.94
INSULIN	561	\$18.75
IRON, TOTAL	571	\$15.00
IRON, TOTAL & IBC	7573	\$28.00
LDH	593	\$18.00
LEAD (B)	599	\$45.00
LIPASE	606	\$10.00
LIPID PANEL	7600	\$27.45
LIPID PANEL W/REFLEX DIRECT LDL	14852	\$27.45
LITHIUM	613	\$30.87
LUTEINIZING HORMONE	615	\$32.00
MAGNESIUM	622	\$25.68
MALB, RANDOM URINE W/O CREAT	17674	\$39.00
METHYLMALONIC	34879	\$119.70
MICROALB/CREATININE RATIO	6517	\$18.00
OBSTETRIC PANEL	20210	\$75.00
OVA AND PARASITE	681	\$75.00
PAIN MGT PROFILE 6*	92464/92454	\$105.00
PAIN MGT PROFILE 7*	92465/92457	\$95.00
PHOSPHATE (AS PHOS.)	718	\$15.00
POTASSIUM	733	\$15.00
PREALBUMIN	4847	\$63.00
PROTIME W/INR	8847	\$8.00
PROGESTERONE	745	\$35.00
PROLACTIN	746	\$38.00
PROSTATE SPECIFIC AG	5363	\$28.75
PROTEIN ELECTRO	747	\$25.00
PROTEIN/CREATININE RATIO	51095	\$52.14
PTH, INTACT/IRMA	35203	\$65.00
PTT, ACTIVATED	763	\$15.00
QUANTIFERON-TB	51265	\$110.00
RENAL FUNCTION PANEL	10315	\$22.29
RETICULOCYTE COUNT	793	\$20.49

*Reflex at an additional cost

TEST NAME	TEST CODE	FEE
RHEUMATOID FACTORS	4418	\$15.00
RPR (DX) REFL FTA	36126	\$9.50
RUBELLA AB, EIA	802	\$21.05
SED RATE BY MOD WEST	809	\$8.00
SJOGREN'S ANTIBODIES	7832	\$78.00
CULTURE, STREP GRP B	5617	\$35.00
T-3, UPTAKE	861	\$15.00
T-3, FREE	34429	\$45.00
T-3, TOTAL	859	\$28.00
T-4, (THYROXINE)	867	\$15.00
T-4, FREE	866	\$20.00
TACROLIMUS	34482	\$98.91
TESTOSTERONE, FREE & TOTAL	36170	\$110.00
TESTOSTERONE, TOTAL	873	\$60.00
TESTOSTERONE, FREE, TOT, BIO	14966	\$149.19
THYROID MICROSOME AB	5081	\$30.00
TP RANDOM URINE W/CREAT	1715	\$53.25
TRIGLYCERIDES	896	\$9.05
TSH	899	\$26.75
TSH W/REFLEX FT4	36127	\$26.75
UREA BREATH TEST – H. PYLORI	14839	\$108.00
UREA NITROGEN (BUN)	294	\$15.00
URIC ACID	905	\$10.00
URINALYSIS, COMP RFX CULTURE	3020	\$8.00
URINALYSIS, COMPLETE	5463	\$8.00
URINALYSIS, MICROSCOPIC	8563	\$7.75
URINALYSIS, REFLEX	7909	\$8.00
VALPROIC ACID	916	\$53.40
VARICELLA VIRUS IGG AB, EIA	4439	\$28.25
VITAMIN A	921	\$69.00
VITAMIN B1, (TPP)	5042	\$78.00
VITAMIN B12	927	\$44.00
VITAMIN B12, FOLIC ACID	7065	\$99.75
VITAMIN D 25 HYDROXY LC/MS	17306	\$55.00

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