

## Surgery Center of Enid

All Procedures are outpatient. Services include: surgeon(s), anesthesia, & facility fees. Pre-op is not included, Implants will be at invoice cost, pathology included are CPT 88300-88309, & 88312. Subsequent stains, reference studies, are not included.

CPT	PROCEDURE	FEE
<b>Endoscopy</b>		
43235	EGD W/O BIOPSY OR DILATION	\$1,500.00
43239	EGD WITH BIOPSY	\$1,700.00
43247	EGD WITH FOREIGN BODY REMOVAL	\$1,600.00
43249	EGD WITH BALLOON DILATION	\$1,700.00
45378	COLONOSCOPY W/ NO TISSUE	\$1,600.00
45380	COLONOSCOPY W/ BIOSPY (SINGLE OR MULTIPLE)	\$1,800.00
45381	COLONOSCOPY WITH INJECTION	\$1,800.00
45385	COLONOSCOPY W/ POLYPECTOMY BY SNARE	\$1,850.00
45390	COLONOSCOPY WITH RESECTION	\$1,850.00
43235+43245+43450	EGD WITH DILATION W/O BIOPSY	\$1,700.00
43239+43249+43450+43248	EGD WITH BIOPSY AND DILATION	\$1,900.00
45378+43235	COLONOSCOPY W/O TISSUE AND EGD WITHOUT BIOPSY	\$2,000.00
45378+43239	COLONOSCOPY W/O TISSUE AND EGD WITH BIOPSY	\$2,200.00
45378+43235+43249+43450+43248	COLONOSCOPY W/O TISSUE AND EGD W/O BIOPSY WITH DILATION	\$2,200.00
45378+43239+43249+43450+43248	COLONOSCOPY W/O TISSUE AND EGD WITH BIOPSY AND DILATION	\$2,400.00
45380+43239	COLONOSCOPY WITH BIOPSY AND EGD WITH BIOPSY	\$2,400.00
45380+45381	COLONOSCOPY WITH	\$2,400.00
45380+45385	COLONOSCOPY WITH BIOPSY AND SNARE BIOPSY	\$2,300.00
45380+43239+43249+43450+43248	COLONOSCOPY WITH BIOPSY AND EGD WITH BIOPSY AND DILATION	\$2,600.00
45380+45385+43239	COLONOSCOPY WITH BIOPSY, SNARE BIOPSY, AND EGD	\$2,400.00
45381+45385	COLONOSCOPY WITH INJECTION AND SNARE BIOPSY	\$2,300.00
45385+43235	COLONOSCOPY WITH POLYPECTOMY (SNARE) AND EGD W/O BIOPSY	\$2,500.00
45385+43239	COLONOSCOPY WITH POLYPECTOMY (SNARE) AND EGD W/BIOPSY	\$2,700.00
45385+43239+43249+43450+43248	BIOPSY AND DILATION	\$2,900.00
<b>Urology</b>		
50590+52005+52332+52352	LITHOTRIPSY XTRCOPR SHOCK WAVE; ETC.	\$6,000.00
50590+52353+52356	LITHOTRIPSY XTRCOPR SHOCK WAVE; ETC.	\$8,150.00
50590+52353	LITHOTRIPSY AND CYSTOURETHROSCOPY	\$8,150.00
50590	LITHOTRIPSY XTRCOPR SHOCK WAVE	\$5,750.00
50590+52332	LITHOTRIPSY WITH STENT PLACEMENT	\$6,000.00
50590+52005	LITHOTRIPSY XTRCOPR SHOCK WAVE; ETC.	\$8,150.00
52005	CYSTO BLADDER W/URETERAL CATHETERIZATION	\$2,300.00
51610	INJECTION PROCEDURE FOR RETROGRADE URETHROCYSTOGRAPHY	\$200.00
52000	CYSTOURETHROSCOPY (SEPARATE PROCEDURE)	\$2,000.00
52204	CYSTOURETHROSCOPY W/ BIOPSY	\$2,800.00
52234	CYSTO W/REMOVAL OF TUMORS SMALL	\$2,800.00
52260	CYSTO W/DILATION OF BLADDER FOR INTERSTITIAL CYSTITIS	\$2,000.00
52281	CYSTO, W/CALIBRATION AND/OR DILATION OF URETHRAL	\$2,300.00
52310	CYSTO W/REMOVAL STENT FROM URETHRA OR BLADDER; SIMPLE	\$2,000.00
52332	CYSTO W/INSERT URETERAL STENT	\$3,600.00
52341	CYSTO W/TREATMENT OF URETERAL STRICTURE	\$2,150.00

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52352	CYSTO W/URETEROSCOPY W/RMVL/MANJ STONES	\$3,600.00
52353+52332	CYSTOURETHROSCOPY WITH STENT PLACEMENT	\$4,150.00
52648	LASER VAPORIZATION OF PROSTATE FOR URINE FLOW	\$4,900.00
53445	INSJ INFLATABLE URETHRAL/BLADDER NECK SPHINCTER	\$15,950.00
54161	CIRCUMCISION AGE >28 DAYS	\$2,000.00
54530	ORCHIECTOMY, RADICAL, FOR TUMOR; INGUINAL APPROACH	\$3,600.00
54500	BIOPSY TESTIS NEEDLE SEPARATE PROCEDURE	\$1,900.00
54650	ORCHIOPEXY, ABDOMINAL APPROACH, FOR INTRA-ABDOMINAL TESTIS	\$3,600.00
54860	EPIDIDYMECTOMY UNILATERAL	\$3,600.00
54860	EPIDIDYMECTOMY - TOTAL	\$4,100.00
54861	EPIDIDYMECTOMY BILATERAL	\$4,100.00
55040	EXCISION HYDROCELE UNILATERAL	\$3,600.00
55400	VASOVASOSTOMY VASOVASORRHAPHY	\$5,300.00
55535	EXC VARICOCELE/LIGATION SPERMATIC VEINS ABDOMINAL APPROACH	\$3,600.00
55700	PROSTATE NEEDLE BIOPSY ANY APPROACH	\$3,000.00
57287	REMOVAL OR REVISION OF SLING FOR STRESS INCONTINENCE	\$4,500.00
57288	SLING OPERATION STRESS INCONTINENCE	\$4,500.00
<b>Eye</b>		
15820	BLEPHAROPLASTY LOWER EYELID	\$4,150.00
15823	BILATERAL BLEPHAROPLASTY UPPER EYELID W/EXCESSIVE SKIN	\$4,150.00
65420	EXCISION/TRANSPOSITION PTERYGIUM W/O GRAFT	\$2,800.00
65855	TRABECULOPLASTY LASER SURG 1/> SESSIONS	\$1,500.00
66982	XCAPSULAR CATARACT RMVL INSJ LENS PROSTH 1 STG	\$3,600.00
66984	CATARACT REMOVAL INSERTION OF LENS	\$3,600.00
66986	EXCHANGE OF INTRAOCULAR LENS	\$3,500.00
67108	EXC LESION EYELID W/O CLSR/W/SIMPLE DIR CLOSURE	\$4,700.00
67808	EXC CHALAZION ANES REQ HOSPIZATION SINGLE/MULT	\$2,000.00
67840	EXCISION CYST UPPER LID	\$2,500.00
67900	REPAIR BROW PTOSIS	\$3,500.00
67917	Repair of Ectropion	\$3,100.00
67917	REPAIR ENTROPION EXTENSIVE	\$3,100.00
67924	Repair of Entropion	\$3,100.00
68720	DACRYOCSTORHINOSTOMY	\$4,200.00
68811	Tear Duct Probe (SINGLE)	\$1,900.00
15823+67900	BILATERAL BLEPHAROPLASTY UPPER EYELID W/EXCESSIVE SKIN & REPAIR OF BROW PTOSIS	\$7,000.00
<b>Orthopedic</b>		
20680	REMOVAL OF IMPLANT DEEP	\$3,350.00
23410	OPEN RCR REPAIR	\$6,300.00
26055	TRIGGER FINGER RELEASE	\$2,800.00
26608	PERCUTANEOUS SKELETAL FIXATION OF METACARPAL FRACTURE	\$2,750.00
27438	ARTHROPLASTY PATELLA W/PROSTHESIS	\$17,500.00
27447	KNEE REPLACEMENT (OUTPATIENT)	\$17,500.00
29822	SHOULDER ARTHROSCOPY W/ DEBRIDEMENT	\$6,200.00
29824	SHOULDER ARTHROSCOPY W/ ACROMIOPLASTY	\$6,200.00
29827	SHOULDER ARTHROSCOPY W/ RCR	\$8,300.00
29880	MEDIAL AND LATERAL	\$4,000.00
29881	KNEE ARTHROSCOPY W/ MENISECTOMY	\$4,000.00
29888	KNEE ARTHROSCOPY W/ ACL REPAIR	\$7,500.00
64721	CARPAL TUNNEL RELEASE	\$2,800.00
26055+64721	TENDON SHEATH INCISION & CARPAL TUNNEL	\$3,100.00

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