

The table below provides the historical range of charges for the most commonly used inpatient and outpatient services at Holy Cross Germantown Hospital, and the average charge for the service. This table is updated *quarterly* and is based on patient charges actually incurred for these services during the past three months and may be used by patients to estimate the charge for services that they may incur. The actual charges for services received may be higher or lower depending on the level of care provided, medical supplies used, pharmacy items administered, and other services provided to the patient. Please contact our Financial Counseling Office via email for assistance or for services not listed below at sshsfincounseling@holycrosshealth.org or at (301) 557-6195. The amounts below reflect hospital charges only. Holy Cross Germantown Hospital does not employ the physicians who practice at the hospital, and each physician group that provides service to you will charge you separately for their services. Please contact these physician groups directly for charge estimates (see Page 3).

Charges for Common Inpatient Surgical Procedures as of December 2025			
Date Range: 10/01/2025 - 12/30/2025	Price Range		
Obstetric Procedures	Minimum	Maximum	Average
Cesarean Section w/o Complications	\$9,061	\$17,369	\$12,444
Cesarean Section w/ Complications	\$9,366	\$19,961	\$13,608
Vaginal Delivery w/o Complications	\$9,841	\$20,392	\$13,036
Vaginal Delivery w/ Complications	\$9,591	\$23,831	\$14,792
Charges for Common Outpatient Procedures as of December 2025			
Date Range: 10/01/2025 - 12/30/2025	Price Range		
Ear, Nose & Throat Procedures	Minimum	Maximum	Average
Dental Surgery Procedure	\$5,103	\$9,163	\$6,926
Gastroenterology Procedures	Minimum	Maximum	Average
Colonoscopy w/ Biopsy	\$3,228	\$5,227	\$3,895
Colonoscopy w/ Snare Polypectomy	\$3,199	\$5,267	\$4,142
Esophagogastroduodenoscopy (EGD) w/ Biopsy	\$2,301	\$9,767	\$4,228
General Surgery Procedures	Minimum	Maximum	Average
Laparoscopic Appendectomy	\$8,038	\$14,596	\$11,290
Laparoscopic Cholecystectomy	\$8,449	\$18,135	\$11,947
Gynecology Procedures	Minimum	Maximum	Average
Laparoscopic Supracervical Hysterectomy	\$16,304	\$23,874	\$21,330
Sling Operation for Stress Incontinence	\$9,402	\$12,879	\$11,198
Interventional Radiology Procedures	Minimum	Maximum	Average
Abdominal Paracentesis	\$2,622	\$10,443	\$5,068
Pleural Thoracentesis	\$1,484	\$2,830	\$1,962
Orthopedic Procedures	Minimum	Maximum	Average
Lapidus Type Bunionectomy	\$34,094	\$80,296	\$53,024
Total Knee Arthroplasty	\$24,524	\$34,434	\$27,874
Spine Procedures	Minimum	Maximum	Average
Anterior Cervical Discectomy & Fusion	\$17,891	\$43,065	\$30,479
Lumbar Spinal Fusion	\$65,298	\$98,386	\$84,365
Urology Procedures	Minimum	Maximum	Average
Cystourethroscopy w/ Lithotripsy & Insertion of Ureteral Stent	\$7,207	\$16,222	\$10,557

Charges for Common Laboratory Services as of December 2025

Date Range: 10/01/2025 - 12/30/2025	Price Range		
Laboratory Procedure	Minimum	Maximum	Average
Antibody Screen RBC	\$17	\$23	\$22
Basic Metabolic Panel (Calcium Total)	\$15	\$21	\$20
Blood Alcohol Concentration Test	\$42	\$57	\$54
Blood Draw - Venipuncture	\$11	\$19	\$14
Blood Clotting Test - Prothrombin Time (PT)	\$11	\$15	\$14
Blood Type Test - ABO	\$6	\$8	\$7
Blood Type Test - RH Factor	\$6	\$8	\$7
B-type Natriuretic Peptide (BNP) test	\$42	\$57	\$54
Cardiac Test - Troponin	\$35	\$48	\$45
CBC	\$11	\$15	\$14
CBC with Differential	\$14	\$19	\$18
Comprehensive Metabolic Panel	\$21	\$36	\$27
COVID-19 Test	\$35	\$48	\$44
Lipase	\$11	\$15	\$14
Magnesium	\$8	\$11	\$11
Pregnancy Test (HCG - Qualitative Blood test)	\$14	\$19	\$18
Pregnancy Test (HCG Quantitative Blood test)	\$33	\$46	\$43
Presumptive Drug Screening Test	\$78	\$107	\$101
Respiratory Pathogen Panel Test	\$645	\$645	\$645
Urinalysis (UA) w/ Microscopic Analysis	\$13	\$17	\$16
Urinary Tract Infection Test	\$28	\$38	\$36

Charges for Common Radiology Services as of December 2025

Date Range: 10/01/2025 - 12/30/2025	Price Range		
CAT Scans	Minimum	Maximum	Average
CAT Scan Abdomen & Pelvis w/o Contrast	\$146	\$202	\$197
CAT Scan Abdomen & Pelvis w/ Contrast	\$283	\$392	\$381
CAT Scan Angiography Chest w/o & w/ Contrast	\$270	\$373	\$363
CAT Scan Cervical Spine w/o Contrast	\$169	\$234	\$228
CAT Scan Head/Brain w/o Contrast	\$96	\$133	\$129
Diagnostic Radiology	Minimum	Maximum	Average
X-Ray Chest 2 Views	\$80	\$111	\$106
X-Ray Chest 1 View	\$64	\$89	\$86
X-Ray Left Shoulder >2 Views	\$80	\$111	\$109
X-Ray Lumbosacral Spine 2-3 Views	\$112	\$155	\$151
MRA/MRI	Minimum	Maximum	Average
MRA Head w/o Contrast	\$618	\$855	\$840
MRA Neck w/o Contrast	\$625	\$864	\$848
MRI Lumbar Spine w/o Contrast	\$279	\$386	\$375
MRI Brain w/o Contrast	\$292	\$405	\$395
Nuclear Medicine	Minimum	Maximum	Average
Nuclear Medicine Hepatobiliary System Imaging w/ Drug	\$2,554	\$2,659	\$2,639

Ultrasound	Minimum	Maximum	Average
Duplex Ultrasound - Abdomen/Pelvis/Retroperitoneal Limited	\$560	\$775	\$759
Ultrasound Abdomen Limited	\$288	\$398	\$389
Ultrasound Early Pregnancy	\$240	\$332	\$321
Ultrasound Fetal Biophysical Profile (BPP)	\$224	\$310	\$306
Ultrasound Pelvis Non-Obstetric Complete	\$336	\$465	\$450
Ultrasound Pregnancy Transvaginal	\$272	\$376	\$365
Ultrasound Transvaginal Non-Pregnant	\$400	\$553	\$534
Venous Duplex Ultrasound - Left Leg	\$448	\$620	\$603

*A venipuncture is charged each time blood is drawn for any blood-based lab test. This is charged once per day for inpatient stays, and once per visit for outpatients, in addition to the charges for the lab tests.

Fees for professional services you received at the hospital from hospital-based physicians and other healthcare providers such as physician assistants, nurse practitioners, etc. will be billed separately to you and are not part of hospital charges. If you have questions regarding their bills, please contact the following:

<p>Anesthesiologists, US Anesthesia Partners 888-339-8727</p> <p>Cardiologists Associates In Cardiology P.A. Cardiac Associates 301-681-5700 301-670-3000</p> <p>ER Physicians, Vitivity Emergency Medicine Service Billing Group: Vitivity 800-498-7157</p> <p>Hospitalists, Vitivity Hospital Medicine Service Billing Group: Vitivity 800-498-7157</p> <p>Intensivists, Vitivity Hospital Medicine Service Billing Group: Vitivity 800-498-7157</p>	<p>Neonatologists, Community Neonatal Associates 240-566-1600</p> <p>Perinatologists, Greater Washington Maternal Fetal Medicine 201-741-3560</p> <p>Radiologists, Professional Services of Holy Cross 833-961-2458</p> <p>Pathologists, Pathology Assoc. of Silver Spring Billing Group: Ventra Health 972-861-7270</p> <p>Other Healthcare Providers, Professional Services of Holy Cross 833-961-2458</p>
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