



## CU MEDICINE UCHEALTH CHERRY CREEK MEDICAL CTR SUITE 302 - DENVER, CO

Code	Description	FEE
J0585	Injection, onabotulinumtoxina, 1 unit	\$10.00
81003	URINALYSIS AUTOMATED W/O MICROSCOPY	\$12.00
99214	OUTPT ESTAB VST-LEVEL IV	\$429.00
99204	OUTPT NEW VST-LVL IV	\$649.00
51798	MEASUREMT POST-VOIDING RESIDUAL URINE &/OR BLADDER CAP BY ULTRASOUND NON-IMAGIN	\$98.00
52000	CYSTOURETHROSCOPY (52000)	\$955.00
51741	COMPLEX UROFLOWMETRY (EG CEE)	\$331.00
51729	COMPLEX CYSTOMETROGRAM W/VOID PRESS STUD & URETH PRESS PROFILE STUDY ANY TECH	\$2,027.00
51784	ELECTROMYOGRAPHY STUDIES (EMG) ANAL/URETHRAL SPHINCTER NO NEEDLE ANY TECHNIQUE	\$955.00
51797	VOIDING PRESSURE STUDIES INTRA-ABDOMINAL (IE RECTAL GASTRIC INTRAPERITONEAL)	\$969.00
99213	OUTPT ESTAB VST-LVL III	\$294.00
52287	CYSTOURETHROSCOPY WITH INJECTION FOR CHEMODENERVATION BLADDER	\$1,709.00
99215	OUTPT ESTAB VST-LVL V	\$575.00
55250	VASECTOMY, UNILATERAL OR BILATERAL, INCL POSTOPT SEMEN EXAMINATION (55250)	\$1,888.00
52310	CYSTOURETHROSCOPY SIMPLE W/REMOVAL FOREIGN BODY CALCULUS/URETERAL STENT	\$1,360.00

If you are not covered by health insurance, you are strongly encouraged to contact our billing office at 303.493.7700 to discuss payment options prior to receiving a health care service from a health care provider at our clinic since posted health care prices may not reflect the actual amount of your financial responsibility.