



832-437-8860 Office

www.ultrasound-services.com

281-810-9974 Fax

Patient Name: _____ Patient Phone: _____

Patient DOB: _____

Pmt type: ___ Cash ___ Credit Insur.# _____ name: _____

Ordering Physician: _____ Date: _____

Physician Signature: _____ DX: _____

Fax Report to: _____ Call STAT report to: _____

Diagnostic Ultrasound Exams	CPT Code	Price	✓
Abdomen (complete)*	76700	\$150.00	
Abdomen (limited)*	76705	\$130.00	
Abdominal Vascular*	93975	\$195.00	
ABI	93922	\$50.00	
Aorta*	93976	\$75.00	
Arterial Doppler (Bilateral)	93925	\$195.00	
Arterial Doppler (Unilateral)	93926	\$150.00	
Biophysical Profile	76819+76816	\$100.00	
Breast (Unilateral: RT/LT)	76641,RT/LT	\$150.00	
Breast (Bilateral)	76641,50	\$195.00	
Carotid Doppler	93880	\$195.00	
Echocardiogram	93306	\$195.00	
Hemodialysis Grafts	93990	\$195.00	
OB Limited*	76815	\$130.00	
OB + Transvaginal*	76815+76817	\$195.00	
OB (Diagnostic)*	76805	\$175.00	
Pelvic (Male/Female)*	76856	\$150.00	
Pelvic + TransVag*	76856+76830	\$195.00	
Renal*	76770	\$130.00	
Soft Tissue	76881	\$130.00	
Testicular/Doppler	76870+93976	\$175.00	
Thyroid	76536	\$130.00	
Transvaginal	76830	\$130.00	
Vein Mapping	G0365	\$195.00	
Venous Doppler (Bilateral)	93970	\$195.00	
Venous Doppler (Unilateral)	93971	\$150.00	

* Prep is Required

Insurances we Accept

- Aetna
- Humana
- Great West
- PHCS
- Cigna
- Superior
- Ambetter
- HealthSmart
- Blue Cross Blue Shield
- Community Health Choice
- United HealthCare
- MultiPlan
- Beech Street
- Hill Country MHMR First Care
- Texas True Choice
- Medicare

Self Pay Rates include
Final Report from the
Radiologist/
Cardiologist.

Hours:

Monday - Saturday
9am - 7pm
By Appointment Only
Call 832-437-8860
or online

Locations:

Katy, TX (Main Office)

440 Cobia Dr., Suite 704
Katy, TX 77494

Richmond, TX

7417 West Grand Parkway South #150
Richmond, TX 77407

The Woodlands, TX

250 Ed English Dr Bldg 3, Ste B,
Shenandoah, TX 77385

Pearland, TX

12004 Shadow Creek Parkway, Suite 121
Pearland, TX 77584

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