FLORIDA INSTITUTE FOR REPRODUCTIVE MEDICINE

"A Place For Modern Miracles"

NON INSURANCE DONOR INSEMINATION CYCLE COST INDEX

MID-CYCLE (FOLLICLE/EGG) MONITORING VISIT

Ultrasound
Urinary LH check for ovulation
Possible HCG shot
Possible Injection

TOTAL	$	**260.00 - $390.00 (Per visit)**

INSEMINATION VISIT

Office Visit/Artificial Insemination	$	420.00
Sperm Washing	$	120.00
Sperm Thaw	$	40.00
TOTAL	**$**	**580.00**

ESTIMATED F.I.R.M. CHARGES	**$**	**840.00 - $1,230.00**
Clomid/Letrozole Medication (Paid directly to pharmacy)	$	50.00 – 80.00 (Estimated)

Pregnancy blood work and pregnancy ultrasound not included.

All fees subject to change without notice.
Please contact Billing to ask if prices have changed prior to your start date.

_____ _____ _____ _____
Patient Signature Date Presented by Date

Effective 04/24

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