



flORIda
INSTITUTE
FOR REPRODUCTIVE MEDICINE

“A Place for Modern Miracles”

NON INSURANCE INSEMINATION CYCLE COST INDEX

BASELINE ULTRASOUND VISIT

Ultrasound	\$ 250.00
Urine pregnancy test	<u>\$ 10.00</u>
TOTAL	\$ 260.00

MID-CYCLE (FOLLICLE/EGG) MONITORING VISIT

Ultrasound	\$ 250.00
Urinary LH check for ovulation	\$ 10.00
Possible HCG shot	\$ 120.00
Possible Injection	<u>\$ 10.00</u>
TOTAL	\$ 390.00

INSEMINATION VISIT

Office Visit/Artificial Insemination	\$ 420.00
Sperm Washing	<u>\$ 120.00</u>
TOTAL	\$ 540.00

ESTIMATED F.I.R.M. CHARGES \$ 1190.00

Clomid/Letrozole Medication (Paid directly to pharmacy) \$ 50.00 – 80.00 (Estimated)

POTENTIAL ADDITIONAL FEES

Second Follow-Up Monitoring Visit	\$ 250.00
Day 3 Ultrasound if doing back-to-back cycles	\$ 250.00

*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 07/22

Baptist Medical Center • 836 Prudential Dr., Suite 902 • Jacksonville, Florida 32207-8337

1-800-556-5620 • Tel 904-399-5620 • Fax 904-399-5645

*In Vitro Fertilization / ICSI • Tubal Surgery • Microsurgery • Laser Surgery • Ovulation Induction • Male Infertility (Andrology)
Sperm Bank • Contraception • Menstrual Irregularities • Hirsutism • Congenital Anomalies • Menopause • Robotic Surgery • Fertility Preservation*