



## (4306) MALE (FASTING) AGE MANAGEMENT PANEL

### CPT COST BREAKDOWN FOR INSURANCE PURPOSES

CPT CODE	ITEM DESCRIPTION	PRICE
82040	Albumin	\$21.59
82627	DHEA-SO4	\$21.59
82670	Estradiol (E2)	\$21.59
83090	Homocysteine	\$22.86
83525	Insulin	\$24.90
84153	Prostate Specific Antigen, Free	\$23.24
84153	Prostate Specific Antigen, Total	\$25.90
84270	Sex Hormone Binding Globulin	\$20.59
84305	Insulin-like Growth Factor-1(GF-1) (SOMATOMEDIN-C)	\$23.18
84402	Free Testosterone	\$25.87
84403	Testosterone	\$22.90
84481	Triiodothyronine (T3), Free	\$21.59
86140	C-Reactive Protein (High Sensitivity)	\$25.95
82397	IGFBP-3	\$28.25
	<b>Total</b>	<b>\$330.00</b>

Meridian Valley Laboratory Tax ID # 91-1909428

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