

PRICELIST FOR PAYING PATIENTS

from other countries (outside the EU) whose medical care is not reimbursed by Czech medical insurance companies (Code 889) - Year 2024

Department of imaging methods, No. 809, ID: 02001025, NS 7400

IDENTIFICATION OF THE PATIENT	
NAME AND SURNAME:	NO. OF THE PATIENT:

CODE	PROCEDURE	No. of POINTS	PRICE IN CZK
09135	Ultrasound imaging of one organ in several scanning planes	199	796
09137	Single organ ultrasound imaging using several scanning planes	265	1060
09139	Ultrasound imaging of three or more organs using several scanning planes	396	1584
89111	x-ray of fingers and metacarpal bones of the hand or the foot	185	740
89113	Skull X-ray, targeted images	258	1032
89115	Skull X-ray, general images	193	772
89117	Neck and cervical spine X-ray	185	740
89119	Thoracic and lumbar spine X-ray	217	868
89121	X-ray of the sacrum and sacroiliac joints	193	772
89123	Pelvis and hip X-ray	152	608
89125	Shoulder joint X-ray	234	936
89127	Bone and joint X-ray of the limbs	258	1032
89129	Rib and sternum X-ray	258	1032
89131	Chest X-ray	202	808
89135	Single exposure X-ray of the entire spine	294	1176
89137	Joint hand-held X-ray images	403	1612
89139	Soft X-ray images of the limbs	299	1196
89141	Single X-ray image of lower extremities	323	1292
89143	Abdominal X-ray	260	1040
89145	Esophagus X-ray	486	1944
89147	Stomach and duodenum X-ray	715	2860
89151	Gastrointestinal passage examination	764	3056
89155	Lower gastrointestinal tract X-ray	1052	4208
89157	Intravenous cholangiography	623	2492
89163	Excretion urography	1191	4764
89181	Arthrography, tenography, bursography	659	2636
89197	Conventional tomography	762	3048
89198	Fluoroscopy	310	1240

89199	Diagnostic and treatment procedures under fluoroscopic guidance	310	1240
89311	Interventional procedure under RDG guidance (fluoroscopy, ultrasound, CT scan) - NO	1110	4440
89313	Percutaneous puncture or biopsy under RDG guidance (fluoroscopy, ultrasound, CT scan) - NO	476	1904
89513	Ultrasound scan of upper abdomen	405	1620
89514	Ultrasound scan of lower abdomen	405	1620
89813	Targeted consulting of the finding with a radiologist*	156	624

* One image only

Procedure price = number of points x point price

POINT PRICE: 4,00 CZK

Date: _____

STAMP:	SIGNATURE OF THE ATTENDING DOCTOR	TOTAL PRICE:
		(confirm checkout RÚ)