



**H S R F H**

HÔPITAL DE SMOOTH ROCK FALLS HOSPITAL

## EMERGENCY ROOM PROVISION FEES

Item	Cost	Quantity	Total
<b>PHARMACEUTICAL</b> (BAR:FSMES/Misc GL: FSERR) for billing purposes only			
Medication Dispensing (per medication)	\$10.00		
Atrovent Puffer	\$25.00		
Ear Drops	\$10.00		
Eye Drops	\$10.00		
Flovent Puffer	\$28.00		
Eye Ointment	\$18.00		
Ventolin Puffer	\$5.00		
Pediatric Suspensions	\$10.00		
Iodosorb Dressing Change	\$10.00		
Polysporin/Other Dressing Change	\$5.00		
<b>SUPPLIES</b> (BAR:FSMES/Misc:FSERR) for billing purposes only			
Aero Chamber Paediatric with mask	\$15.00		
Catheter Replacement Bag	\$5.00		
Clavicle Brace	\$13.00		
Colles Splint	\$17.00		
Crutches Small (Child)	\$18.00		
Crutches Medium	\$28.00		
Crutches Large	\$28.00		
Fiberglass Cast Adult	\$25.00		
Fiberglass Cast Child	\$15.00		
Shoulder Immobilizer	\$20.00		
Finger Splint	\$3.00		
Staple Remover	\$8.00		
Tensors	\$5.00		
<b>PROCEDURES:</b> (BAR:FSMES/Misc: FSERR) for billing purposes only			
Depomedrol without prescription	\$10.00		
Lovenox without prescription/F/U doses	\$25.00		
Cryotherapy (cosmetic wart/skin tag)	\$10.00		
Other:			
<b>SUBTOTAL</b>			
<b>GRAND TOTAL</b>			

For more payment option information, please call (705) 338-2781 ext. 2118

