



QualiTech Medical Laboratory Fees

Code: QTML-CS-MNL-UM-01

Issue #3

Clinical Chemistry Tests

Effective: June 1st 2021

Routine Tests		CODE	Type of Sp.	Cost per Test
1	Alanine Transaminase	ALT	S	\$ 20.00
2	Albumin	ALB	S	\$ 15.00
3	Alkaline Phosphatase	ALP	S	\$ 20.00
4	Aspartate Transaminase	AST	S	\$ 20.00
5	α-Amylase	AMY	S	\$ 30.00
6	Amylase, Pancreatic	P_AMY	S	\$ 40.00
7	Bile Acids, Total (Fasting Sample)	TBA	S	\$ 50.00
8	Bilirubin, Direct	DBILI	S	\$ 15.00
9	Bilirubin, Total	TBILI	S	\$ 15.00
10	Calcium	CA	S	\$ 25.00
11	Carbon Dioxide, Total/Bicarbonate	CO2	S	\$ 20.00
12	Chloride	Cl	S	\$ 20.00
13	Cholesterol	CHOL	S	\$ 20.00
14	Cholesterol, HDL (Direct)	HDL_D	S	\$ 35.00
15	Cholesterol, LDL (Direct)	LDL_D	S	\$ 45.00
16	Cholesterol, small LDL (sLDL)	S_LDL	S	\$ 120.00
17	Cholinesterase	CHOLIN	S	\$ 40.00
18	Creatinine_J	CREAT	S	\$ 15.00
19	Creatinine _Enzymatic (Highly specific as a marker for renal function)	CREAT_E	S/P/U	\$ 100.00
20	Creatine Kinase	CK	S	\$ 20.00
21	Creatine Kinase (MB) Isoenzyme	CKMB	S	\$ 60.00
22	Gamma Glutamyl Transferase	GGT	S	\$ 30.00
23	Glucose, Fluid	GLU_FL	Fluid	\$ 20.00
24	Glucose, Fasting	FBS	P	\$ 15.00
25	Glucose, Random	RBS	P	\$ 15.00
26	Glucose Tolerance Test, Long (FBS, 1/2, 1, 1.5, 2 & 2.5 Hrs Post 75 gm Glu)	GTT	P	\$ 90.00
27	Glucose Tolerance Test, Short (FBS & 2Hrs Post 75 gm Glu)	GTT_SH	P	\$ 30.00
28	Glucose Profile (FBS, PPBF, PPL, PPS)	GL_PROF	P	\$ 60.00
29	Glucose: O'Sullivan Screen (1 Hr post 50 gm glucose)	OSUL_SCR	P	\$ 15.00
30	Glucose: O'Sullivan Test (FBS, 1Hr, 2Hr, 3Hr Post 100 gm Glu)	OSUL_TST	P	\$ 60.00
31	Glucose Tolerance Test, in Pregnancy (FBS, 1Hr & 2Hrs Post 75 gm Glu)	GEST_GTT	P	\$ 45.00
32	Glucose-6-Phosphate dehydrogenase	G6PDH	WB	\$ 50.00
33	Glycated Haemoglobin, HbA1C (Imola)	HBA1C	EDTA/WB	\$ 70.00
34	Iron, Total	IRON	S	\$ 40.00
35	Iron Binding Capacity, Total	TIBC	S	\$ 70.00
36	Lactate Dehydrogenase	LDH	S	\$ 20.00
37	Lipase	LIP	S/P	\$ 40.00
38	Magnesium	MG	S	\$ 25.00
39	Phosphorous, Inorganic	IP	S	\$ 25.00
40	Potassium	K	S	\$ 20.00
41	Protein, Total	TP	S	\$ 15.00
42	Protein, Fluid (Pleural/CSF/Other)	PRO_FL	Fluid	\$ 30.00

Clinical Chemistry Tests Cont'd				
Test Name				
Routine Tests Cont'd				
		CODE	Type of Sp.	Cost per Test
43	Sodium	NA	S	\$ 20.00
44	Transferin	T_FERIN	S	\$ 75.00
45	Triglycerides, Fasting	TRIG	S	\$ 20.00
46	Urea	UREA	S	\$ 15.00
47	Uric Acid	UAC	S	\$ 15.00

Specific Proteins				
		CODE	Type of Sp.	Cost per Test
48	Cystatin C (Renal function indicator for small GFR changes) (Imola)	CYS_C	S	\$ 200.00

ImmunoAssays				
Test Name				
		CODE	Type of Sp.	Cost per Test
Tumor Markers				
49	Alpha Feto Protein (Liver) by CLIA	AFP	S	\$ 100.00
50	CA 125 (Ovary) by CLIA	CA125	S	\$ 120.00
51	CA 15-3 (Breast) by CLIA	CA15-3	S	\$ 120.00
52	CA 19-9 (Breast, Gastric & Pancreas) by CLIA	CA19-9	S	\$ 150.00
53	CA 50 (colorectal, Stomach, Lung, Gallbladder, Pancreas, Uterus, Liver)	CA 50	S	\$ 180.00
54	CYFRA 21-1 (non-small cell lung cancer (NSCLC) & bladder) by CLIA	CYFRA 21-1	S	\$ 180.00
55	CA 242 (gastro-intestinal, Pancreas & Lung) by CLIA	CA 242	S	\$ 180.00
56	CA 72-4 (Stomach & Ovary) by CLIA	CA 72-4	S	\$ 180.00
57	CEA (Colorectal) by CLIA	CEA	S	\$ 100.00
58	NSE (small cell Lung cancer(SCLC)) by CLIA	NSE	S	\$ 180.00
59	Prostatic Specific Antigen, Total by CLIA	PSA	S	\$ 100.00
60	%Free Prostatic Specific Antigen (includes PSA & fPSA) by CLIA	%FPSA	S	\$ 210.00
Thyroid				
61	Thyroid Stimulating Hormones, Ultrasensitive by CLIA	TSH	S	\$ 50.00
62	Thyroxine, Free by CLIA	FT4	S	\$ 50.00
63	Tri-Iodothyronine, Free by CLIA	FT3	S	\$ 50.00
64	Thyroglobulin, Total by CLIA	TG	S	\$ 150.00
Fertility				
65	Anti-Mullerian Hormone by CLIA	AMH	S	\$ 400.00
66	Beta Human Chorionic Gonadotrophin by CLIA	BHCG	S	\$ 70.00
67	Dehydroepiandrosterone-sulphate (DHEA-S) by CLIA	DHEA-S	S	\$ 160.00
68	Follicular Stimulating Hormone by CLIA	FSH	S	\$ 60.00
69	Luteinizing Hormone by CLIA	LH	S	\$ 60.00
70	Oestradiol (E2) by CLIA	OEST	S	\$ 60.00
71	Progesterone by CLIA	PROG	S	\$ 60.00
72	Prolactin by CLIA	PROL	S	\$ 60.00
73	Testosterone by CLIA	TESTO	S	\$ 80.00
74	Testosterone, Free by CLIA	FTESTO	S	\$ 100.00

ImmunoAssays Cont'd				
	Test Name	CODE	Type of Sp.	Cost per Test
Anaemia				
75	B12 (Vitamin) by CLIA (Pernicious Anaemia)	B12	S	\$ 90.00
76	Ferritin by CLIA (Iron Deficiency & 2 ^o Tumour Markers)	FERR	S	\$ 70.00
77	Folic Acid by CLIA (Megaloblastic/Macrocytic Anaemia)	FOLIC	Fasting S	\$ 100.00
Bone Metabolism				
78	Parathyroid Hormone, Intact by CLIA	PTH_I	S	\$ 150.00
79	25-OH Vitamin D (D3) by ELISA	25OH_D	S	\$ 200.00
Diabetes				
80	C-Peptide by CLIA	C-PEP	S	\$ 110.00
81	Fructosamine (Imola)	FRUCTO	S	\$ 80.00
82	Glutamic Acid Decarboxylase 65 Ab by CLIA	GAD_65	S	\$ 150.00
83	Glycated Haemoglobin, HbA1C (Imola)	HBA1C	EDTA/WB	\$ 70.00
84	Insulin Autoantibody by CLIA	IAA	S	\$ 150.00
Cardiac				
85	CKMB Mass by CLIA	CKMB	S	\$ 60.00
86	Troponin I by CLIA	TROP_I	S	\$ 120.00
Immunoglobulins				
87	Immunoglobulin-IgA by immunoturbidimetry (Imola)	IgA	S	\$ 120.00
88	Immunoglobulin-IgE by immunoturbidimetry (Imola)	IgE	S	\$ 150.00
89	Immunoglobulin-IgG by immunoturbidimetry (Imola)	IgG	S	\$ 120.00
90	Immunoglobulin-IgM by immunoturbidimetry (Imola)	IgM	S	\$ 120.00
91	IgE Allergy Panel 1, Atopy (Derm.pter, Derm.farinae, alder, Birch, Hazel, Grass mix, Rye pollen, Mugwort, Plantain, Cat, Dog, Horse, Alternaria alternata, Egg white, Milk, Peanut, Hazelnut, Carrot, Wheat Flour, Soya bean)	PNL1_ATP	S	\$ 300.00
92	IgE Allergy Panel 2, Inhalative (Derm.pteronysinus, Derm.farinae, Alder, Birch, Hazel, Oak, Grass mix, Rye pollen, Mugwort, Plantain, Cat, Dog, Horse, Guinea Pig, Hamster, Rabbit, Penicillium notatum, Cladospor.herbarum, Aspergillus fumigatus, Alternaria alternata)	PNL2_INH	S	\$ 300.00
93	IgE Allergy Panel 3, Food (Hazelnut, Peanut, Almond, Milk, Egg White, Egg Yolk, Casein, Potato, Celery, Carrot, Tomato, Cod, Crab, Orange, Apple, Wheat Flour, Rye Flour, Sesame, Soya Bean)	PNL3_FD	S	\$ 300.00
94	IgE Allergy Panel 4, Pediatric (Derm.pter, Derm.farinae, Birch, Grass Mix, Cat, Dog, Alternaria alternata, Milk, Alpha-Lactalbunin, Beta-Lactoglobulin, Casein, Egg White, Egg Yolk, Bovine serum Albumin, Soya Bean, Carrot, Potato, Wheat Flour, Hazel Nut, Peanut)	PNL4_PED	S	\$ 300.00
95	IgE Allergy Panel Pediatric for under age 5 (Mite Mix, Cat, Dog, Cacao, Apple, Egg White, Egg Yolk, Beef, Pork, Chicken, Wheat Flour, Rye Flour, Shellfish/Fish Mix, Buckwheat Flour, Penicillium notatum/chrysoqenum, Candida albicans, Feathers, Milk [pasteurised], Banana, Potato)	U5_PED	S	\$ 300.00
96	IgE Allergy Panel Extra food (Milk, Egg White, Egg Yolk, Wheat Flour, Corn Flour, Sesame, Oranges, Onion, Garlic, Shrimp, Crab, Tuna, Soya Bean, Peanuts, Potato, Tomato, Almond, Camomile Tea, Banana, Hazelnut)	EXTRA_FD	S	\$ 300.00
Other				
97	Adenocorticotropic Hormone (ACTH) by CLIA	ACTH	EDTA/P	\$ 200.00
98	Cortisol AM by CLIA	CORT_AM	S/U	\$ 60.00
99	Cortisol PM by CLIA	CORT_PM	S/U	\$ 60.00
100	C-Reactive Protein (CRP) by CLIA	CRP	S	\$ 75.00
101	Growth Hormone by CLIA	GH	S	\$ 80.00

Other Cont'd		CODE	Type of Sp.	Cost per Test
102	Insulin-Like Growth Factor-1	IGF_1	S	\$ 300.00

Autoimmune Assays				
Test Name		CODE	Type of Sp.	Cost per Test
Autoimmune Disease				
103	Anti-Nuclear Antibody Screen by Elisa	ANA	S	\$ 100.00
104	Anti-Nuclear Antibody Detect by Elisa	ANA_DET	S	\$ 100.00
105	Anti-Double Stranded DNA Antibody screen by Elisa	DSDNA	S	\$ 100.00
106	Anti-Jo-1 Antibody by Elisa	JO_1	S	\$ 100.00
107	Anti-Scl-70 Antibody by Elisa	SCL_70	S	\$ 100.00
108	Anti-Smith Antibody by Elisa	SM	S	\$ 100.00
109	Anti-Sm/RNP Antibody by Elisa	RNP	S	\$ 100.00
110	Anti-SSA Antibody by Elisa (Anti Ro)	SSA	S	\$ 100.00
111	Anti-SSB Antibody by Elisa (Anti La)	SSB	S	\$ 100.00
112	Extractable Nuclear Antigen Screen by Elisa	ENA_SCR	S	\$ 120.00
113	Anti-beta-2-Glycoprotein 1 Screen	B2GP_SCR	S	\$ 120.00
114	Anti-Cyclic Citrullinated Peptide hs Ab by Elisa	CCP_HS	S	\$ 200.00
115	Anti-Cardiolipin IgG Ab by Elisa	CARD_IGG	S	\$ 120.00
116	Anti-Cardiolipin IgM Ab by Elisa	CARD_IGM	S	\$ 120.00
117	Anti-Cardiolipin Screen by Elisa	CARD_SCR	S	\$ 120.00
118	Anti-Phospholipid, IgG Ab by Elisa	PLIP_IGG	S	\$ 120.00
119	Anti-Phospholipid, IgM Ab by Elisa	PLIP_IGM	S	\$ 120.00
120	Anti-Ribosomal-P Antibody by Elisa	RIB_P	S	\$ 120.00
121	Anti-Neutrophil Cytoplasmic Antibody Screen hs (cANCA/pANCA)	ANCA_HS	S	\$ 120.00
122	Anti-Thyroglobulin by Elisa	Anti-TG	S	\$ 120.00
123	Anti-Thyroid Peroxidase by Elisa (Antithyroid microsomal antibody-AMA)	Anti-TPO	S	\$ 120.00
124	Anti-Gliadin Screen	GLDN_SCR	S	\$ 120.00
125	Anti-Tissue Transglutaminase IgA	TTG_IGA	S	\$ 120.00
126	Complement 3 by immunoturbidimetry (Imola)	C3	S	\$ 150.00
127	Complement 4 by immunoturbidimetry (Imola)	C4	S	\$ 150.00
128	Rheumatoid Factor Screen by Elisa	RF_SCR	S	\$ 75.00
129	Anti-Parietal Cell by Elisa	APC_AB	S	\$ 120.00
130	Anti-Intrinsic Factor by Elisa	IF_AB	S	\$ 120.00

Urinary Chemistry Tests:				
Test Name		CODE	Type of Sp.	Cost per Test
131	Creatinine Clearance (24 Hr Urine)	CREA_CLR	U & S	\$ 60.00
132	MicroAlbumin (Fresh or 24-Hr Urine)	M_ALB	U	\$ 120.00
133	MicroAlbumin/Creatinine Ratio (Fresh or 24-Hr Urine)	MALB_UCR	U	\$ 150.00
134	Urinary Amylase (Random)	U_AMY	U	\$ 50.00
135	Urinary Calcium (24 Hr Urine) (PNL)	24HR_CA	U	\$ 40.00
136	Urinary Chloride (24 Hr Urine) (PNL)	24HR_CL	U	\$ 40.00
137	Urinary Cortisol (24 Hr Urine) (PNL)	24HRCORT	U	\$ 70.00
138	Urinary Creatinine (Random)	U_CREA	U	\$ 35.00
139	Urinary Creatinine (24 Hr Urine) (PNL)	24HR_CRE	U	\$ 40.00
140	Urinary Glucose (Random)	U_GLUC	U	\$ 35.00

Urinary Chemistry Tests Cont'd		CODE	Type of Sp.	Cost per Test
141	Urinary Glucose (24 Hr Urine) (PNL)	24HRGLU	U	\$ 40.00
142	Urinary Protein (Random)	U_PRO	U	\$ 35.00
143	Urinary Protein (24 Hr Urine) (PNL)	24HR_PRO	U	\$ 40.00
144	Urinary Protein:Urinary Creatinine Ratio (Random specimen)	UPR:UCR	U	\$ 70.00
145	Urinary Protein:Urinary Creatinine Ratio (24 Hr specimen)	24HRPCR	U	\$ 80.00
146	Urinary Potassium (Random)	U_K	U	\$ 35.00
147	Urinary Potassium (24 Hr Urine) (PNL)	24HR_K	U	\$ 40.00
148	Urinary Sodium (Random)	U_NA	U	\$ 35.00
149	Urinary Sodium (24 Hr Urine) (PNL)	24HR_NA	U	\$ 40.00
150	Urinary Urea (24 Hr Urine) (PNL)	24HR_URE	U	\$ 40.00
151	Urinary Uric Acid (24 Hr Urine) (PNL)	24HR-UAC	U	\$ 40.00

Toxicology				
Therapeutic Drugs :		CODE	Type of Sp.	Cost per Test
152	Acetaminophen (Imola)	ACETAMIN	S	\$ 200.00
153	Carbamazepine/Tegretol (Imola)	TEGRE	S	\$ 200.00
154	Digoxin (Imola)	DIGOXIN	S	\$ 200.00
155	Lithium (Imola)	LI	S	\$ 60.00
156	Phenobarbital (Imola)	PHENO_BB	S	\$ 200.00
157	Phenytoin/Dilantin (Imola)	DILAN	S	\$ 200.00
158	Valporic acid (Imola)	VALP_AC	S	\$ 200.00
Drugs of Abuse:		CODE	Type of Sp.	Cost per Test
159	Ethanol/Alcohol (Quantative) (Imola)	ETHANOL	U or S	\$ 100.00
160	Cocaine (qualitative) RT	COCA	U	\$ 35.00
161	Cannabis / Marijuana (qualitative) RT	CAN	U	\$ 35.00
162	Nicotine (qualitative) RT	NIC	U or S	\$ 100.00
163	Drugs of Abuse 6-Panel: COC, C'BIS, AMP, BAR, OPI, PCP (qualitative) RT	DOA_6	U	\$ 210.00
164	Drugs of Abuse 10-Panel: COC, C'BIS, AMP, MET-AMP, BAR, BZO, OPI, MET, PCP, TCA (qualitative) RT	DOA_10	U	\$ 350.00

Profiles				
Routine Profiles		CODE	Type of Sp.	Cost per Test
165	Bone Profile: Alb, ALP, Ca, PO4	BONE_P	S	\$ 85.00
166	Cardiac Enzymes: AST, CK, LDH, CK-MB	CAR_ENZ	S	\$ 120.00
167	Diabetic Profile 1: for HbSS patients: FBS, Fructosamine, Micro-Albumin	DP_SS	U/P&WB	\$ 215.00
168	Diabetic Profile 2: FBS, HbA1C, Micro-Albumin	DP_HB	U/P&WB	\$ 195.00
169	Electrolytes 1: Na, K, Cl, TCO2	LYTES1	S	\$ 80.00
170	Electrolytes 2: Sodium, Potassium, Calcium, Phos	LYTES2	S	\$ 90.00
171	Liver Function Tests: T&DBili, ALP, ALT, AST, T/Prot, Alb	LFT	S	\$ 120.00
172	Lipid Profile (Total): Chol, Trig, dHDL (Quan), dLDL (Quan), RR, VLDL	TOT_LIP	S	\$ 125.00
173	Metabolic Profile: Ca, FBS, LFT, RFT 1, Chol	CMP	P&S	\$ 300.00
174	Protein Electrophoresis (include TP & Alb)	PE_PANEL	S	\$ 120.00
175	Renal Function 1: Urea, Creatinine, Na K, Cl, TCO2,	RENAL1	S	\$ 120.00
176	Renal Function 2: Urea, Creatinine, Na, K, Cl, TCO2, Alb, T/P, Ca, PO4	RENAL2	S	\$ 200.00
177	Iron Panel: Total Iron, UIBC, TIBC ©, %Saturation	IRON_PNL	S	\$ 110.00

Hormonal Profiles		CODE	Type of Sp.	Cost per Test
178	Thyroid Function : Ultra sensitive TSH, Free T4, Free T3	TFT	S	\$ 150.00
179	Hyperthyroid Screen: Free T4, Free T3	H_THY	S	\$ 100.00
180	Fertility Profile: FSH, LH, Prolactin	FERT	S	\$ 180.00
Auto Immune Profiles				
181	Auto Immune Screen: ANA, ENA Screen, RF Screen	AUTOSCRN	S	\$ 295.00
182	ENA Panel: SS-A, SS-B, SM, SM/RNP, JO-1, SCL-70	ENA_PNL	S	\$ 600.00
183	Lupus Panel: ANA, dsDNA, C3, C4, RF Scrn, SCL-70, TPO, SM, SM/RNP, SSA, SSB	LUPUS_P	S	\$ 1,195.00
184	Inflammation: CRP, RF	INFLAM	S	\$ 150.00
Infectious Disease Profiles				
185	TORCH IgG Panel: Toxo, Rubella, CMV, Herpes 1&2	TOR_IGG	S	\$ 400.00
186	TORCH IgM Panel: Toxo, Rubella, CMV, Herpes 1&2	TOR_IGM	S	\$ 400.00

HAEMATOTOLOGY

Routine Tests		CODE	Type of Sp.	Cost per Test
187	Cell Count (CSF or Body Fluid)	C_COUNT	Fluid	\$ 20.00
188	Complete Blood Count, Auto Diff	CBC_AUTO	EDTA/WB	\$ 20.00
189	CBC with Manual Differential Smear & RBC morphology	CBC_MDF	EDTA/WB	\$ 40.00
190	Erythrocyte Sedimentation Rate	ESR	EDTA/WB	\$ 15.00
191	Eosinophil Count	EOSIN	EDTA/WB	\$ 20.00
192	Haemoglobin Electrophoresis	HB_ELEC	EDTA	\$ 45.00
193	Reticulocyte Count	RETIC	EDTA/WB	\$ 20.00
194	Sickle Cell Screen	SICK	EDTA/WB	\$ 20.00
195	Lupus Erythematosus (Serology)	LE_SERO	S	\$ 25.00
196	Malaria Smear	MAL_SM	EDTA/WB	\$ 60.00
197	Malaria Ag (Serology)	MAL_SERO	EDTA/WB	\$ 35.00

Coagulation Studies

	CODE	Type of Sp.	Cost per Test
198	d-Dimer by CLIA	D_DIMER	Citrate P \$ 175.00
199	INR (includes Prothrombin Time test)	INR	Citrate P \$ 30.00
200	Lupus Anticoagulant	LAC	Citrate P \$ 250.00
201	Prothrombin Time	PT	Citrate P \$ 25.00
202	Partial Thromboplastin Time	PTT	Citrate P \$ 25.00

IMMUNOHAEMATOTOLOGY

	CODE	Type of Sp.	Cost per Test
203	Blood grouping	BL_GRP	EDTA/WB \$ 25.00
204	Combs test-Direct	DCT	EDTA/WB \$ 30.00

MICROBIOLOGY

Routine Culture and Sensitivity		CODE	Type of Sp.	Cost per Test
205	Ear (Left or Right)	EAR_CLT	Swab	\$ 75.00
206	Nose	NOSE_CLT	Swab	\$ 75.00
207	Throat	THT_CLT	Swab	\$ 60.00
208	Eye (Left or Right)	EYE_CLT	Swab	\$ 75.00

209	Endocervical	ECVL_CLT	Swab	\$ 80.00
	Routine Culture and Sensitivity Cont'd	CODE	Type of Sp.	Cost per Test
210	Urethral	URT_CLT	Swab	\$ 80.00
211	High Vaginal	HSV_CLT	Swab	\$ 80.00
212	Pus	PUS_CLT	Swab/Fld	\$ 75.00
213	Semen	SEM_CLT	Semen	\$ 75.00
214	Skin	SKN_CLT	Swab	\$ 75.00
215	Sputum (Non-AFB)	SPUT_CLT	Sputum	\$ 75.00
216	Stool for Salmonella/Shigella (diarrhoeal sample)	STL_CLT	Stool	\$ 80.00
217	Stool for Salmonella/Shigella/Campylobacter (Bloody diarrheal)	STL_CMPY	Stool	\$ 150.00
218	Tubing	TUBING	Swab	\$ 80.00
219	Washing	WASH	Fluid	\$ 60.00
220	Urine (Early AM Middle stream) (includes a Complete UA and AST)	URN_CLT	Urine	\$ 70.00
221	Wound	WND_CLT	Swab	\$ 80.00

- NB: 1. Prices include gram stain on all cultures except Throat, Stool, Washing & Urine Cultures.**
2. Non-diarrhoeal samples will not be cultured except in cases of suspected asymptomatic carriers. Clinicals stating reason for request with such samples will be required.
3. Urines will not be accepted on Saturdays because no staff work on Sundays.

Microscopy		CODE	Type of Sp.	Cost per Test
222	Gram Stain	GRM_STN	Fixed slide	\$ 20.00
223	Ziehl Neelson (AFB) Stain	ZN_AFB	Sputum	\$ 50.00
224	Semen Analysis	SEMEN	Semen	\$ 80.00
225	Fungus - Direct Examination	FUNGUS	Fixed slide	\$ 30.00

Urine Tests		CODE	Type of Sp.	Cost per Test
226	Complete Urinalysis	UA	Urine	\$ 30.00
227	Pregnancy Test	PREG	Urine	\$ 30.00
228	Albumin/Glucose	ALB_PRO	Urine	\$ 20.00
229	Bence Jones Protein	BJPRO	Urine	\$ 30.00

Stool Tests		CODE	Type of Sp.	Cost per Test
230	Calprotectin (Intestinal inflammation)	CALPRO_T	Stool	\$ 100.00
231	Champylobacter (Diarrhoeal bloody sample)	CHAMPY_V	Stool	\$ 75.00
232	Direct Examination for Amoeba, Giardia, etc. only on fresh watery stool	AMOEB	Fresh Stool	\$ 25.00
233	E. coli O157:H7 (non-bloody diarrhoea/asymptomatic carriage)	EC_O157	Stool	\$ 75.00
234	Helicobacter pylori, Ag (H.pylori Ag)	HPYL_AG	Stool	\$ 75.00
235	Lactoferrin (Intestinal inflammation)	LACTO_F	Stool	\$ 75.00
236	Occult Blood	OCC_BLD	Stool	\$ 35.00
237	Ova, Cysts & Parasites (OCP)	OCP	Stool	\$ 20.00
238	Rotavirus, Norovirus & Adenovirus Antigen Panel (Fresh Diarrhoeal)	RAN_COMB	Stool	\$ 150.00

Serology Tests		CODE	Type of Sp.	Cost per Test
239	Anti Streptolysin O Titre (ASOT), (quantitative) RT	ASOT	S	\$ 40.00
240	C-Reactive Protein (CRP), (quantitative) RT	CRP	S	\$ 75.00
241	Infectious Mononucleosis (IM) (quantitative) RT	IM	S	\$ 40.00
242	Rheumatoid Arthritis (RA) (quantitative) RT	RA	S	\$ 75.00

243	Leptospira IgM Antibody, (quantitative) RT	LEPTO	S	\$ 50.00
Infectious & Viral Diseases				
		CODE	Type of Sp.	Cost per Test
244	Chlamydia Antigen (Fresh Dry Dacron Swab w/no transport media)	CHLAMY	Swab	\$ 60.00
245	Chlamydia trachomatis, IgG by Elisa	CHLM_IgG	S	\$ 75.00
246	Chlamydia trachomatis, IgM by Elisa	CHLM_IgM	S	\$ 75.00
247	Cytomegalovirus IgG by CLIA	CMV_IGG	S	\$ 75.00
248	Cytomegalovirus IgM by CLIA	CMV_IGM	S	\$ 75.00
249	Helicobacter pylori, Ab IgA by Elisa	HPYL_IGA	S	\$ 50.00
250	Helicobacter pylori, Ab IgG by Elisa	HPYL_IGG	S	\$ 50.00
251	Hepatitis A Virus Ab by CLIA	HAAB	S	\$ 100.00
252	Hepatitis B Surface Antigen by CLIA	HBSAG	S	\$ 60.00
253	Hepatitis B Surface Antibody (Anti-HepBs) by CLIA	HBS_AB	S	\$ 100.00
254	Hepatitis C Virus Ab by CLIA	HCV	S	\$ 120.00
255	Herpes Simplex Virus 1 IgG by Elisa	HSV1_IGG	S	\$ 75.00
256	Herpes Simplex Virus 1 IgM by Elisa	HSV1_IGM	S	\$ 75.00
257	Herpes Simplex Virus 2 IgG by Elisa	HSV2_IGG	S	\$ 75.00
258	Herpes Simplex Virus 2 IgM by Elisa	HSV2_IGM	S	\$ 75.00
259	HIV 1&2 (3rd generation) QTML Algorithm will be applied	HIV1&2	S	\$ 90.00
260	HIV 1&2 Ag/Ab combo (HIV1 p24) by CLIA	HIV_P24	S	\$ 150.00
261	HTLV1& 2 by CLIA	HTLV1& 2	S	\$ 80.00
262	Measles, IgG by CLIA	MEAS_IGG	S	\$ 90.00
263	Mumps, IgG by CLIA	MUMP_IGG	S	\$ 90.00
264	Rubella IgG by CLIA	RUB_IGG	S	\$ 100.00
265	Rubella IgM by CLIA	RUB_IGM	S	\$ 100.00
266	Treponema Pallidum antibody/Syphilis (TP)	TP_AB	S	\$ 50.00
267	Toxoplasma IgG by CLIA	TOXO_IGG	S	\$ 75.00
268	Toxoplasma IgM by CLIA	TOXO_IGM	S	\$ 75.00
269	Varicella (Chicken Pox) IgG by Elisa	VARI_1GG	S	\$ 90.00
270	VDRL/RPR	VDRL	S	\$ 50.00
271	TORCH IgG Panel: Toxo, Rubella, CMV, Herpes 1&2	TOR_IGG	S	\$ 400.00
272	TORCH IgM Panel: Toxo, Rubella, CMV, Herpes 1&2	TOR_IGM	S	\$ 400.00

Vector-borne Disease				
		CODE	Type of Sp.	Cost per Test
273	Dengue Duo NS1Ag, IgG/IgM Ab Virus	DENG_AB	S	\$ 120.00

MOLECULAR DIAGNOSTICS				
Real Time Polymerase Chain Reaction (RT PCR) Tests				
		CODE	Type of Sp.	Cost per Test
274	Chlamydia trachomatis/Neisseria gonorrhoea, Duplex RT PCR	CTNG_PNL	Swab/urine	\$ 400.00
275	Corona Virus (COVID-19), RT PCR	SARSCOV2	Swab	\$ 450.00
276	Dengue, RT PCR	DENG_PCR	S/WB/P	\$ 300.00
277	Dengue/Chikungunya, Duplex RT PCR	DEN_CHIK	S/WB/P	\$ 400.00
278	Influenza A/B, Duplex RT PCR	FLU_PNL	Swab	\$ 400.00
279	H1N1, RT PCR	H1N1	Swab	\$ 300.00
280	Hepatitis C Virus, RT PCR	HCV_PCR	S/WB/P	\$ 400.00
281	HIV, RT PCR	HIV_PCR	S/WB/P	\$ 300.00
282	Human Papillomavirus (HPV-HR) types 16.18.31.45, RT PCR	HPV_PAN	Cerv. Swab	\$ 500.00

283	Malaria P. vivax/P. falciparum, Duplex RT PCR	MAL_PNL	EDTA WB	\$ 400.00
284	Mycobacterium tuberculosis, RT PCR	MTB_PCR	Sputum	\$ 400.00

OVERSEAS TESTS

PATERNITY DNA Tests		CODE	Type of Sp.	Cost per Test
285	Personal Paternity DNA Test	PPDNA	Buccal Swab	\$ 1,300.00
286	Legal Paternity DNA Test	LPDNA	Buccal Swab	\$ 1,400.00
287	Additional Father/Child, Personal	PPADD_CH	Buccal Swab	\$ 400.00
288	Additional Father/Child, Legal	LPADD_CH	Buccal Swab	\$ 500.00

LEGEND		
S		Serum
P		Plasma
U		Urine
WB		Whole Blood
Swab		Swab in VTM

Greyed Test Rows will soon be available

285	Glucose drink for tolerance tests	G_DRNK		\$ 5.00
286	Copy of Report	R_COPY		\$ 5.00

QTML reserve the right to make changes based on market availability and costs.

Quality is our habit and we abide by it.
Thank you for choosing QualiTech Medical Laboratory Inc.