

DUKE UNIVERSITY HEALTH SYSTEM  
DUKE FERTILITY CENTER  
(919) 572 - HOPE

**THIS IS ESTIMATE ONLY - CHARGES MAY EXCEED ESTIMATED AMOUNT**

**Estimated Costs for Controlled Ovarian Hyperstimulation  
and Intrauterine Insemination (per cycle)**

Charge	CPT Code	Description
\$354.00 each	76857	Ultrasound
\$210.50 each	82670	Estradiol

The actual number of visits will vary according to the individual needs of the patient.  
1 baseline ultrasound and at least 3 monitoring ultrasounds.

If you are having an intrauterine insemination as part of your therapy, the following charges will occur on the day of insemination:

Charge	CPT Code	Description
\$260.00	58322	Intrauterine Insemination
\$287.00	89260	Sperm Washing
Total	\$547.00	

**ACTUAL CHARGES WILL DEPEND UPON YOUR INDIVIDUAL SERVICES.**

**PAYMENT FOR EACH VISIT IS DUE AT TIME SERVICE IS RENDERED.**

The diagnosis code used for each visit will be based on your condition  
(e.g. endometriosis, tubal factor infertility, unexplained infertility, etc.)

The treatment itself is suggestive of infertility regardless of diagnosis code used.

You will receive prescriptions from us for all necessary medications. These may  
be filled at the pharmacy of your choice or we can fax to a mail order pharmacy.

These charges are estimates only and are subject to change without prior notice.

updated 7/6/06