

Makati Medical Center
Eye Care Center (Dr. Carlos L. Sevilla Center)

| SERVICE / DESCRIPTION | LOWEST PRICE | HIGHEST PRICE |
|---|--------------|---------------|
| ANTERIOR PHOTO ONE EYE / BOTH EYES | 975.00 | 2,460.00 |
| ANTERIOR PHOTO EXTRA COPY | 430.00 | 516.00 |
| AUTO FLUORESCENCE PHOTO ONE EYE / BOTH EYES | 1,700.00 | 3,120.00 |
| AUTOREFRACTION ONE EYE / BOTH EYES | 460.00 | 510.00 |
| BIOMETRY (A-SCAN) SONOMED ONE EYE / BOTH EYES | 1,025.00 | 1,968.00 |
| BIOMETRY (IMMERSION) SONOMED ONE EYE / BOTH EYES | 2,110.00 | 2,712.00 |
| CATARACT DIAGNOSTIC FOR CONTACT ONE EYE / BOTH EYES | 2,820.00 | 7,560.00 |
| CATARACT DIAGNOSTIC FOR NON-CONTACT ONE EYE / BOTH EYES | 2,255.00 | 7,656.00 |
| CORNEAL ANALYSIS (TOPOGRAPHY) ONE EYE / BOTH EYES | 1,000.00 | 1,440.00 |
| CORNEAL PACHYMETRY ONE EYE / BOTH EYES | 1,500.00 | 3,300.00 |
| DIODE ENDOLASER ONE EYE / BOTH EYES | 5,900.00 | 12,000.00 |
| DIODE LIO ONE EYE / BOTH EYES | 6,060.00 | 14,046.00 |
| DIODE RETINOPEXY ONE EYE / BOTH EYES | 6,700.00 | 12,600.00 |
| DIODE SMALL SPOT LASER ONE EYE / BOTH EYES | 6,060.00 | 14,046.00 |
| DIODE TSCPC ONE EYE / BOTH EYES | 8,500.00 | 13,560.00 |
| DIODE TTT ONE EYE / BOTH EYES | 6,200.00 | 13,800.00 |
| DISC PHOTO ONE EYE / BOTH EYES | 1,100.00 | 2,640.00 |
| DISC PHOTO EXTRA COPY | 430.00 | 516.00 |
| EYE OSMOLARITY TEST ONE EYE / BOTH EYES | 2,700.00 | 4,140.00 |
| EYE ULTRASOUND - B SCAN ONE EYE / BOTH EYES | 3,370.00 | 7,746.00 |
| EYE ULTRASOUND - B SCAN EXTRA COPY | 430.00 | 516.00 |
| FA EXTRA COPY | 405.00 | 900.00 |
| FLUORESCEIN ANGIOGRAM | 4,500.00 | 5,400.00 |
| FOCAL LASER ONE EYE / BOTH EYES | 4,500.00 | 10,200.00 |
| FUNDUS PHOTO ONE EYE / BOTH EYES | 2,100.00 | 3,360.00 |
| FUNDUS PHOTO EXTRA COPY | 425.00 | 510.00 |
| GANGLION CELL ANALYSIS (GCA) ONE EYE / BOTH EYES | 3,600.00 | 6,000.00 |
| GLAUCOMA SCREENING BOTH EYES | 7,100.00 | 18,120.00 |
| GLAUCOMA SCREENING ONE EYE | 4,500.00 | 14,520.00 |
| GRID LASER ONE EYE / BOTH EYES | 4,060.00 | 9,732.00 |
| INFRARED PHOTO ONE EYE / BOTH EYES | 980.00 | 2,472.00 |
| K - READING ONE EYE / BOTH EYES | 260.00 | 510.00 |
| LASER GONIOPLASTY ONE EYE / BOTH EYES | 4,500.00 | 10,200.00 |
| LASER IRIDOPLASTY ONE EYE / BOTH EYES | 3,950.00 | 9,732.00 |
| LASER IRIDOTOMY ONE EYE / BOTH EYES | 4,500.00 | 10,200.00 |
| LASER RETINOPEXY ONE EYE / BOTH EYES | 4,060.00 | 9,732.00 |
| LASER SUTURELYSIS ONE EYE / BOTH EYES | 4,000.00 | 8,040.00 |
| LASER TRABECULOTOMY ONE EYE / BOTH EYES | 4,500.00 | 10,200.00 |
| MACULAR PIGMENT OPTICAL DENSITY ONE EYE / BOTH EYES | 700.00 | 1,200.00 |
| NON-CONTACT BIOMETRY ONE EYE / BOTH EYES | 1,230.00 | 2,214.00 |

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| OCT ANGIOGRAPHY ONE EYE / BOTH EYES | 3,200.00 | 5,880.00 |
| OCT ANTERIOR SEGMENT ONE EYE / BOTH EYES | 3,400.00 | 5,760.00 |
| OCT MACULA ONE EYE / BOTH EYES | 3,200.00 | 5,880.00 |
| OCT NERVE ONE EYE / BOTH EYES | 3,200.00 | 5,880.00 |
| PACHYMETRY (CONTACT) SONOMED ONE EYE / BOTH EYES | 1,440.00 | 3,072.00 |
| PACHYMETRY ONE EYE / BOTH EYES | 1,335.00 | 3,072.00 |
| PAN RETINAL PHOTOCOAGULATION ONE EYE / BOTH EYES | 4,500.00 | 10,200.00 |
| PARACENTHESIS OF AC W/ RELEASE OF AQUEOUS FLUID ONE EYE / BOTH EYES | 1,540.00 | 3,072.00 |
| PARACENTHESIS OF AC W/ RELEASE OF AQUEOUS FLUID ONE EYE / BOTH EYES | 6,365.00 | 9,852.00 |
| PERIMETRY EXTRA COPY | 200.00 | 648.00 |
| PERIMETRY/VFT HUMPHREY ONE EYE / BOTH EYES | 1,915.00 | 4,098.00 |
| PERIMETRY/VFT OCTOPUS ONE EYE / BOTH EYES | 2,100.00 | 4,320.00 |
| PNEUMATIC RETINOPEXY W/ USE OF PATTERN LASER ONE EYE / BOTH EYES | 6,270.00 | 10,596.00 |
| PRE-ASSESSMENT FEE FOR FA | 450.00 | 540.00 |
| RED FREE PHOTO ONE EYE / BOTH EYES | 980.00 | 2,472.00 |
| RED FREE PHOTO EXTRA COPY | 430.00 | 516.00 |
| REMOVAL OF FOREIGN BODY (CORNEA) ONE EYE / BOTH EYES | 1,435.00 | 3,576.00 |
| REMOVAL OF FOREIGN BODY (CORNEA) ONE EYE / BOTH EYES | 4,000.00 | 9,120.00 |
| SPECULAR MICROSCOPY ONE EYE / BOTH EYES | 1,540.00 | 3,690.00 |
| STEREO DISC PHOTO ONE EYE / BOTH EYES | 1,100.00 | 2,760.00 |
| STEREO DISC PHOTO EXTRA COPY | 540.00 | 648.00 |
| STEREO FUNDUS PHOTO ONE EYE / BOTH EYES | 1,100.00 | 2,760.00 |
| YAG LASER/ CAPSULOTOMY ONE EYE / BOTH EYES | 3,800.00 | 9,120.00 |