



**St. Teresa's Hospital**  
**聖德肋撒醫院**

**Common Chargeable Items 常用項目收費**

*本院提供各項醫療服務。下列價目表只列出常用項目，其他服務及收費詳情請向有關部門查詢。*

*A range of services is provided by the Hospital. The following tables only show common chargeable items. Please refer to the respective department for further pricing information on other services provided.*



# 聖德肋撒醫院 ST. TERESA'S HOSPITAL

## ROOM CHARGES

(Latest version date 最後更新日期: 1/7/2025)

| Accommodation<br>類別                  |   | Daily Room Charges<br>每日租金 |                 |                  |                  | Deposit<br>按金 | Extra Bed<br>陪人床收費  | Medical and<br>Associated Charges <sup>8</sup><br>醫療雜項收費 <sup>8</sup> | Remarks<br>備註   |   |
|--------------------------------------|---|----------------------------|-----------------|------------------|------------------|---------------|---|---|---|---|
|                                      |   | Main Block<br>大樓           | East Wing<br>東座 | North Wing<br>北座 | South Wing<br>南座 |               |   |   |   |   |
| Premium Private<br>Room<br>優質私家房     | Premium Suite 套房                        | \$11,300 -<br>\$15,300     | -               | -                | -                | \$60,000      | 2 free companion beds<br>inclusive,<br>\$1,000 for each extra<br>companion.<br>免收首兩位陪人床費用，<br>額外每位\$1,000                             | PP  | 客、飯廳、豪華浴室設備<br>Living and dining rooms, deluxe<br>bathroom                                    |   |
| Private Room<br>私家房                  | Private Room 私家房                        | \$2,100-\$4,100            | \$2,500 #       | \$2,100-\$2,300  | -                | \$30,000      | \$400-\$500   | PR  | Bathroom , T.V., Refrigerator (partly),<br>#Isolation room facilities<br>浴廁、電視、雪櫃(部份)、#隔離病房設備 |   |
| Semi-private<br>Room<br>半私家房         | Semi-private Single Room<br>半私家單人房      | -                          | \$1,750         | -                | -                | \$20,000      | \$300   | SP  | Bathroom , T.V., Refrigerator (partly)<br>浴廁、電視、雪櫃(部份)  |   |
|                                      | Standard Semi-private Room<br>標準雙人房     | \$1,050 - \$1,180          | \$1,000-\$1,050 | -                | -                |               |   |   |   |   |
| Standard Ward<br>標準房                 | 3-4 Bedded Room**<br>三至四人房              | \$730-\$800                |                 |                  |                  | \$10,000      | \$200   | SW  | Bathroom , T.V.<br>浴廁、電視<br>**包括include 667-5 & 667-6   |   |
|                                      | 5-7 Bedded Room<br>五至七人房                | \$650                      | \$680-\$730     | -                | \$680-\$730      |               |   |   |   |   |
|                                      | 8-11 Bedded Room<br>八至十一人房              | \$630 - \$680              | \$610-\$660     | -                | \$610-\$660      |               |   |   |   |   |
|                                      | Day Bed 日間病床                            | -                          | \$500           | \$500            | -                | -             | -   |   |   |   |
| Paediatric Ward<br>兒童病房              | Private Room 私家房                        | \$2,500 - \$2,700          | -               | -                | -                | \$30,000      | Companion of children<br>patient aged 12 or<br>below will not be<br>charged for the extra<br>bed charges. 十二歲<br>或以下的病者 家屬免<br>收陪人床費* | PR  | Facilities commensurate<br><br>with bed type of ward<br><br>設備與病房類別相符                         |   |
|                                      | Single Room 單人房                         | \$2,100 - \$2,300          | -               | -                | -                |               |   | SP  |   |   |
|                                      | Standard Semi-private Room<br>標準雙人房     | \$1,200 - \$1,300          | -               | -                | -                | \$20,000      |   | SW  |   |   |
|                                      | 3 Bedded Room<br>三人房                    | \$830 - \$880              | -               | -                | -                | \$10,000      |   |   |   |   |
|                                      | Cot 育嬰箱                                 | \$1,200                    | -               | -                | -                | \$10,000      |   |   |   | - |
|                                      | Incubator 溫箱                            | \$1,200                    | -               | -                | -                |               |   |   |   |   |
| Incubator with Phototherapy<br>溫箱及照燈 | \$2,300                                 | -                          | -               | -                |                  |               |   |   |   |   |
| O & G<br>Department<br>婦產科部          | Private Room 私家房                        | \$2,100 - \$3,100          | -               | -                | -                | \$30,000      | \$400   | PR  | 設備與病房類別相符   |   |
|                                      | Superior Semi-private Room<br>優質雙人房     | \$1,500                    | -               | -                | -                | \$20,000      | -   | SP  |   |   |
|                                      | Standard Semi-private Room<br>標準雙人房     | \$1,100                    | -               | -                | -                |               |   |   |   |   |
|                                      | 3 Bedded Room<br>三人房                    | \$700 - \$750              | -               | -                | -                | \$10,000      | -   | SW  |   |   |
|                                      | 6 Bedded Room<br>六人房                    | \$680                      | -               | -                | -                |               |   |   |   |   |
|                                      | 5 Bedded Room (Ante-natal)<br>產前五人房 開心價 | \$600                      | -               | -                | -                |               |   |   |   |   |
|                                      | Nursery 嬰兒寄養                            | \$1,200                    | -               | -                | -                | \$10,000      | -   |   |   |   |
| Special Care Unit<br>特別治療部           | Negative Pressure Room ^<br>負氣壓房 ^      | \$7,000                    | -               | -                | -                | \$60,000      | \$500   | PP  | T.V. 電視<br>^ with Bathroom<br>^ 設有浴廁  |   |
|                                      | Premium Private Room ^<br>優質私家房 ^       | \$6,300                    | -               | -                | -                | \$60,000      | \$500   | PP  |   |   |
|                                      | Private Room 私家房                        | \$5,300                    | -               | -                | -                | \$30,000      | \$400   | PR  |   |   |
|                                      | Semi-private Room 雙人房                   | \$4,300                    | -               | -                | -                | \$25,000      | \$300   | SP  |   |   |
|                                      | Standard Ward 標準房                       | \$3,300                    | -               | -                | -                | \$20,000      | \$200   | SW  |   |   |
| Haemodialysis<br>Unit<br>血液透析中心      | Single Room 單人房                         | \$450                      | -               | -                | -                | -             | -   | Commensurate with<br>bed type of ward<br>收費與住院病人入住<br>之病房類別相符         | T.V.<br>電視  |   |
|                                      | Standard Ward 標準房                       | \$400                      |                 |                  |                  |               |   |   |   |   |

**有關資助病房簡介** 本院另設有資助病房，每天房租為港幣一百二十元正，包括早、午、晚三餐基本膳食。其醫療雜項收費一般比標準房的收費相對較低。住院時，須繳交現金或信用咭港幣七千元正作按金。如需要，陪人床每天收費為港幣一百五十元正。資助日間服務的病床收費為港幣九十六元正，包括一餐基本膳食。  
另有全面資助護養病床二十張，入住須由醫務社工評估轉介。

**Subsidized Wards' Information** The Subsidized Wards' daily bed charge will be HK\$120 per day, which includes the provision of 3 basic meals (breakfast, lunch and dinner). Generally, the medical and associated charges for subsidized wards are lower than that of the standard ward. Initial deposit of HK\$7,000 in cash or by credit card is required during admission. Extra bed charge of HK\$150 will be charged for companion of patient. Subsidized Day Case bed charge will be HK\$96, which includes one basic meal.  
There are 20 fully subsidized geriatric beds. Admission requires screening by medical social worker.

- Note:
- Foreign tourists requiring admission into the hospital have to pay an initial deposit of HK\$50,000 or more in cash or by credit card. \* Free for one companion only
  - Hospital charges are payable once every 4 days (once every 2 days for Special Care Unit). \*只限一名家屬
  - An additional amount of HK\$200 will be charged for each change of bed or room requested by patients.
  - Relatives who stay after 10:00 p.m. (whether they use bed or not) are required to pay extra bed charges. For private room, the maximum number of companion permitted is two; for other wards, only one companion is allowed. Companion for child patient aged 12 or below will not be charged for the extra bed charges (Free for one companion only).
  - This schedule only shows daily room rate, which covers accommodation and general basic items (i.e. an initial patient assessment, taking and recording vital signs, and ongoing monitoring according to the patient's condition; receiving and implementing doctors' orders: administering standard oral medications, coordinating examination appointments, and subsequently following up on the resulting reports; routine patient communication, care coordination, and provide timely assistance.)
  - The above prices are exclusive of doctor's fee, which includes fees for operation, anaesthetic, doctor's visit, special consultation, etc. Please refer to your physician for details.
  - Medical and associated charges are commensurate with the bed type of ward. Please refer to Accounts Department or the respective departments / wards for the pricing information of other services provided.
  - Wi-Fi Broadband Internet Access is provided in wards.
- 註:
- 外來遊客如需住院，須繳交現金或信用咭港幣伍萬元起作按金。
  - 所有房租及治療等費用，須每四天結帳一次（特別治療部每兩天結帳一次）。
  - 病人如要求轉房或床，每次轉換需繳付額外費用港幣二百元正。
  - 晚上十時後，家屬欲陪伴病者，不論是否佔用陪人床均需收費。半私家房及普通病房病者祇限壹名家屬陪伴；私家房則最多兩名。十二歲或以下的病者，家屬免收陪人床費（只限一位）。
  - 本收費表只列出每日病房 / 病床租金，已包括一般基本項目（入院時為病人之初步評估，按病人需要作出生命徵象之量度及持續監察，接收及執行醫生之指示，口服藥物之派發、安排各項檢查及預約、各項報告之跟進及處理，作為病人與各方之溝通橋樑，並作出適時協助。）
  - 以上收費並不包括醫生費用，而醫生費用一般包括手術、麻醉、巡房、特診等。詳情請向有關醫生查詢。
  - 醫療雜項乃按入住病房類別而收取有關費用。其他服務及收費詳情，請向會計部或有關部門 / 病房查詢。
  - 病房均設有無線寬頻上網。



| <b>Operating Theatre</b><br><b>手術室</b>  |                               |   |   |   |  |
|---|-------------------------------|---|---|---|--|
| <b>Operating Theatre Basic Charge</b><br>(operating theatre materials are excluded) | <b>基本手術室費</b><br>(手術室物料不包括在內) | <b>Standard Wards</b><br><b>In-patient</b><br>標準房收費 | <b>Semi-Private Room</b><br><b>In-patient</b><br>半私家房收費 | <b>Private Room</b><br><b>In-patient</b><br>私家房收費 | <b>Subsidized Wards</b><br><b>In-patient</b><br>資助病房收費 |
| Breast lump excision  | 乳房腫塊切除術                       | \$2,010   | \$2,810   | \$3,120   | \$1,405  |
| Carpal tunnel release (L.A.)  | 腕管鬆解術 (局部麻醉)                  | \$1,940   | \$2,720   | \$3,010   | \$1,360  |
| Carpal tunnel release (G.A.)  | 腕管鬆解術 (全身麻醉)                  | \$2,290   | \$3,210   | \$3,550   | \$1,605  |
| Cholecystectomy (Laparoscopic)  | 腹腔鏡膽囊切除術                      | \$10,330  | \$14,460  | \$16,010  | \$7,230  |
| Cholecystectomy (Open)  | 膽囊切除術                         | \$2,780   | \$3,890   | \$4,310   | \$1,945  |
| Circumcision (L.A.)   | 包皮環切術 (局部麻醉)                  | \$1,650   | \$2,310   | \$2,560   | \$1,155  |
| Circumcision (G.A.)   | 包皮環切術 (全身麻醉)                  | \$2,010   | \$2,810   | \$3,120   | \$1,405  |
| Colectomy (Laparoscopic)  | 腹腔鏡結腸切除術                      | \$10,870  | \$15,220  | \$16,850  | \$7,610  |
| Colectomy (Open)  | 結腸切除術                         | \$3,210   | \$4,490   | \$4,980   | \$2,245  |
| Colposcopy  | 陰道窺鏡                          | \$2,180   | \$3,050   | \$3,380   | \$1,525  |
| Dilation and curettage  | 擴張子宮頸及刮除子宮內膜術(刮宮)             | \$1,980   | \$2,770   | \$3,070   | \$1,385  |
| Direct laryngoscopy   | 直接喉鏡檢查術                       | \$2,290   | \$3,210   | \$3,550   | \$1,605  |
| Haemorrhoidectomy   | 痔瘡切除術                         | \$2,120   | \$2,970   | \$3,290   | \$1,485  |
| Hernia repair (Laparoscopic)  | 腹腔鏡疝氣修補術                      | \$9,710   | \$13,590  | \$15,050  | \$6,795  |
| Hernia repair (Open)  | 疝氣修補術                         | \$2,020   | \$2,830   | \$3,130   | \$1,415  |
| Herniotomy  | 疝氣切除術                         | \$2,020   | \$2,830   | \$3,130   | \$1,415  |
| Hysterectomy (Laparoscopic)   | 腹腔鏡輔助子宮切除術                    | \$10,980  | \$15,370  | \$17,020  | \$7,685  |
| Hysterectomy (Open)   | 子宮切除術                         | \$3,480   | \$4,870   | \$5,390   | \$2,435  |
| Knee arthroscopy  | 膝關節腔內窺鏡術                      | \$6,330   | \$8,860   | \$9,810   | \$4,430  |
| Laminectomy   | 椎板切除術                         | \$4,080   | \$5,710   | \$6,320   | \$2,855  |
| Micro-laryngoscopy  | 顯微鏡下(微型)喉鏡檢查術                 | \$3,030   | \$4,240   | \$4,700   | \$2,120  |
| Open reduction of various fractures<br>(Upper / Lower Limb)                         | 上肢 / 下肢不同部位之開放性復位             | \$3,560   | \$4,980   | \$5,520   | \$2,490  |
| Internal fixation of various fractures<br>(Upper / Lower Limb)                      | 上肢 / 下肢不同部位之內固定術              | \$2,230   | \$3,120   | \$3,460   | \$1,560  |



| Operating Theatre<br>手術室  |                               |   |   |   |  |
|---|-------------------------------|---|---|---|--|
| <b>Operating Theatre Basic Charge</b><br>(operating theatre materials are excluded) | <b>基本手術室費</b><br>(手術室物料不包括在內) | <b>Standard Wards</b><br><b>In-patient</b><br>標準房收費 | <b>Semi-Private Room</b><br><b>In-patient</b><br>半私家房收費 | <b>Private Room</b><br><b>In-patient</b><br>私家房收費 | <b>Subsidized Wards</b><br><b>In-patient</b><br>資助病房收費 |
| Ovarian cystectomy (Laparoscopic)   | 腹腔鏡卵巢囊腫切除術                    | \$10,330  | \$14,460  | \$16,010  | \$7,230  |
| Ovarian cystectomy (Open)   | 卵巢囊腫切除術                       | \$2,780   | \$3,890   | \$4,310   | \$1,945  |
| Spine fusion  | 脊髓骨溶合術                        | \$4,450   | \$6,230   | \$6,900   | \$3,115  |
| Thyroidectomy (Hemi)  | 甲狀腺切除術                        | \$3,200   | \$4,480   | \$4,960   | \$2,240  |
| Thyroidectomy (Total)   | 全甲狀腺切除術                       | \$4,320   | \$6,050   | \$6,700   | \$3,025  |
| Tonsillectomy   | 扁桃腺切除術                        | \$2,260   | \$3,160   | \$3,500   | \$1,580  |
| Trigger finger release (L.A.)   | 板機狀指鬆解術 (彈弓指) (局部麻醉)          | \$1,940   | \$2,720   | \$3,010   | \$1,360  |
| Trigger finger release (G.A.)   | 板機狀指鬆解術 (彈弓指) (全身麻醉)          | \$2,280   | \$3,190   | \$3,530   | \$1,595  |

Remarks:

- (1) Surcharges will be levied for emergency services or services are required outside office hours.
- (2) The above table only shows operating theatre basic charge of common operations procedure. All information should be used for reference only.  
The actual charge will depend on the complexity of case. The above prices are exclusive of any operating theatre materials and medicines, equipment and instruments, doctor(s) operation fee and anaesthetic fee.
- (3) Please contact Accounts Department staff for further enquires. Enquiries : 2200-3101

備註:

- (1) 緊急服務及非辦公時間之服務將加收附加費。
- (2) 以上價目表僅列出常見手術之基本手術室收費，以供參考。實際收費需按手術之複雜程度而定。  
以上費用並不包括在手術中使用的物料和藥物費用、儀器及設備、醫生手術費、麻醉師費。
- (3) 如有查詢請向會計部職員聯絡。查詢: 2200-3101



| Endoscopy Centre<br>內視鏡檢查中心 |        |  |  |  |   |                                   |
|-----------------------------|--------|--|--|--|---|-----------------------------------|
| <u>Particulars</u>          | 項目     | <u>Standard Wards</u><br><u>In-patient</u><br><u>標準房收費</u> | <u>Semi-Private Room</u><br><u>In-patient</u><br><u>半私家房收費</u> | <u>Private Room</u><br><u>In-patient</u><br><u>私家房收費</u> | <u>Subsidized Wards</u><br><u>In-patient</u><br><u>資助病房收費</u> | <u>Out-patient</u><br><u>門診收費</u> |
| Bronchoscopy                | 支氣管內窺鏡 | \$3,300  | \$4,620  | \$5,120  | \$2,310   | \$3,300                           |
| Colonoscopy                 | 結腸內窺鏡  | \$3,400  | \$4,760  | \$5,270  | \$2,380   | \$2,380                           |
| Gastroscopy                 | 胃內窺鏡   | \$2,550  | \$3,570  | \$3,950  | \$1,785   | \$1,785                           |
| Cystoscopy                  | 膀胱內視鏡  | \$2,700  | \$3,780  | \$4,180  | \$1,890   | \$2,700                           |

Remarks:

- (1) Surcharges will be levied for emergency services or services are required outside office hours.
- (2) The above table only shows the basic charges of common procedures of Endoscopy Centre. All information should be used for reference only.  
The above prices are exclusive of any doctor(s) fee, MAC charges, histopathology fee, medicines and associated materials, extra equipment and instruments, additional treatments or procedures such as polypectomy .
- (3) The actual charge will depend on the complexity of case .
- (4) Please contact Endoscopy Centre staff for further enquires. Enquiries : 2200-3220

備註:

- (1) 緊急服務及非辦公時間之服務將加收附加費。
- (2) 以上價目表僅列出內視鏡檢查中心的常用項目之基本收費，以供參考。以上費用並不包括醫生費、監察麻醉費用、病理化驗費用、藥物及物料費用、額外儀器及設備、施行額外治療或程序(如切除瘻肉)。
- (3) 實際收費需按照個案之複雜程度而定。
- (4) 如有查詢請向內視鏡檢查中心職員聯絡。查詢: 2200-3220



| Common Nursing Procedures<br>常見護理程序                  |          |                                       |   |                                     |  |
|--|----------|---------------------------------------|---|-------------------------------------|--|
| Particulars  | 項目       | Standard Wards<br>In-patient<br>標準房收費 | Semi-Private Room<br>In-patient<br>半私家房收費 | Private Room<br>In-patient<br>私家房收費 | Subsidized Wards<br>In-patient<br>資助病房收費 |
| Admission Service                                    | 入院服務     | \$230                                 | \$230                                     | \$330                               | \$115                                    |
| Catheterization With 2 Ways Foley/Nylon Catheter     | 兩路管導尿術   | \$280                                 | \$390                                     | \$430                               | \$195                                    |
| Catheterization With 3 Ways Foley                    | 三路管導尿術   | \$390                                 | \$550                                     | \$605                               | \$275                                    |
| Catheterization With Silicone Foley                  | 矽膠管導尿術   | \$315                                 | \$440                                     | \$490                               | \$220                                    |
| Small Dressing                                       | 無菌洗症(小)  | \$215                                 | \$300                                     | \$330                               | \$150                                    |
| Medium Dressing                                      | 無菌洗症(中)  | \$330                                 | \$460                                     | \$510                               | \$230                                    |
| Major Dressing                                       | 無菌洗症(大)  | \$550                                 | \$770                                     | \$855                               | \$385                                    |
| Colostomy Dressing                                   | 結腸造口無菌洗症 | \$165                                 | \$232                                     | \$255                               | \$116                                    |
| Insertion Of Gastric Tube For Feeding                | 胃管插入餵飼   | \$240                                 | \$340                                     | \$370                               | \$170                                    |
| Insertion Of Gastric Tube For Feeding (Silicone R/T) | 矽膠胃管插入餵飼 | \$440                                 | \$620                                     | \$680                               | \$310                                    |
| Feeding with Syringe/Bottles Set/Funnel Package      | 餵食護理套餐   | \$400                                 | \$560                                     | \$620                               | \$280                                    |
| Wound Nurse Service                                  | 傷口科護理指導  | \$550                                 | \$770                                     | \$850                               | \$385                                    |

Remarks:

(1)The above table only shows the charges of common chargeable items of Nursing Procedures . All information should be used for reference only.

The above prices are exclusive of any doctor(s) fee, medicines and associated materials.

(2)Please contact Accounts Department staff for further enquires. Enquiries : 2200-3101

備註:

(1)以上價目表僅列出的常用護理程序項目之收費，以供參考。以上費用並不包括醫生費、葯物及相關物料費。

(2)如有查詢請向會計部職員聯絡。查詢: 2200-3101



| Out Patient Department<br>門診部        |                                   |   |
|--------------------------------------|-----------------------------------|---|
| <u>Services Hours</u>                | 診症時間                              | <u>Consultation Fee (Resident Doctors only)</u><br>醫生診症費 (只限駐院醫生) |
| Monday to Saturday<br>星期一至星期六        | 08:00 – 19:59<br>早上八時正至晚上七時五十九分   | \$280   |
|                                      | 20:00 – 07:59<br>晚上八時正至翌日早上七時五十九分 | \$430   |
| Sunday & Public Holidays<br>星期日及公眾假期 | 08:00 – 19:59<br>早上八時正至晚上七時五十九分   | \$350   |
|                                      | 20:00 – 07:59<br>晚上八時正至翌日早上七時五十九分 | \$470   |

Remarks:

(1)The above table only shows the basic charges of Out Patient Department. All information should be used for reference only.

The above fees do not include doctor's special examinations/ operations, medicines, materials and treatment fees.

(2)Please contact Out Patient Department staff for further enquires. Enquiries : 2200-3108

備註:

(1)以上價目表僅列出門診部的基本收費，以供參考。以上費用並不包括醫生特別檢查/手術、藥費、物料及治療。

(2)如有查詢請向門診部職員聯絡。查詢: 2200-3108



| Eye Centre<br>眼科中心                          |               |                            |
|---|---------------|----------------------------|
| <u>Particulars</u>                          | 項目            | <u>Out-Patient</u><br>門診收費 |
| Consultation Fee                            | 診症費           | \$800                      |
| <b>LASIK</b>                                | 激光矯視手術        |                            |
| Lasik pre-operation examination (Both Eyes) | 激光矯視手術前檢查(雙眼) | \$1,000                    |
| #Lasik Package (Both Eyes)                  | #激光矯視手術套餐(雙眼) | \$19,800                   |

Remarks:

- (1) Surcharges will be levied if services are required outside office hours.
- (2) The above table only shows the basic rate of common chargeable items of Eye Centre. All information should be used for reference only.  
Doctor's special examinations/operations, medicines, materials and treatment fees are excluded.
- (3) #Lasik package includes doctor(s) fee and 5 times of post-operation examination.  
However, medicines and extra materials are excluded. All information should be used for reference only.
- (4) Please contact Eye Centre staff for further enquires. Enquiries : 2200-3240

備註:

- (1) 非辦公時間之服務將加收附加費。
- (2) 以上價目表僅列出眼科中心的常用項目之基本收費，以供參考。醫生特別檢查/手術、藥費及治療費用另計。
- (3) #激光矯視手術套餐已包括醫生費及手術後5次覆診檢查。但並不包括藥物及額外物料。以上價目表僅供參考。
- (4) 如有查詢請向眼科中心職員聯絡。查詢: 2200-3240





| Skin Laser & Plastic Surgery Centre<br>皮膚激光及整形外科中心 |             |                            |
|--|-------------|----------------------------|
| <u>Particulars</u>                                 | 項目          | <u>Out-Patient</u><br>門診收費 |
| Consultation Fee (Resident Doctors only)           | 診症費(只限駐院醫生) | \$500                      |

Remarks:

(1)The above table only shows the basic charge of Skin Laser & Plastic Surgery Centre. All information should be used for reference only.

The above fees do not include doctor's special examinations/operations, medicines, materials and treatment fees.

(2)Please contact Skin Laser & Plastic Surgery Centre staff for further enquires. Enquiries : 2200-3210

備註：

(1)以上價目表僅列出皮膚激光及整形外科中心的基本收費，以供參考。以上費用並不包括醫生特別檢查/手術、藥費、物料、治療及療程。

(2)如有查詢請向皮膚激光及整形外科中心職員聯絡。查詢: 2200-3210



| Comprehensive Breast Centre<br>乳腺診斷治療中心  |             |                                   |
|--|-------------|-----------------------------------|
| <u>Particulars</u>                       | 項目          | <u>Out-Patient</u><br><u>門診收費</u> |
| Consultation Fee (Resident Doctors only) | 診症費（只限駐院醫生） | \$500                             |

Remarks:

(1)The above table only shows the basic charge of Comprehensive Breast Centre. All information should be used for reference only.

The above fees do not include doctor's special examinations/ operations, medicines, materials and treatment fees.

(2)Please contact Comprehensive Breast Centre staff for further enquires. Enquiries : 2200-3310

備註：

(1)以上價目表僅列出乳腺診斷治療中心的基本收費，以供參考。以上費用並不包括醫生特別檢查/手術、藥費、治療、物料及療程。

(2)如有查詢請向乳腺診斷治療中心職員聯絡。查詢：2200-3310



| Diagnostic Treatment Centre (Vascular Surgery)<br>診斷治療中心 (血管外科) |         |                                   |
|---|---------|-----------------------------------|
| <u>Particulars</u>  | 項目      | <u>Out-Patient</u><br><u>門診收費</u> |
| Consultation Fee  | 診症費     | \$780                             |
| Ultrasound Examination for Vascular                             | 超聲波血管檢查 | \$1,000-\$1,500                   |

Remarks:

(1)The above table only shows the basic charge of Diagnostic Treatment Centre (Vascular Surgery). All information should be used for reference only.

The above fees do not include doctor's special examinations/ operations, medicines, materials and treatment fees.

(2)Please contact Diagnostic Treatment Centre (Vascular Surgery) staff for further enquires. Enquiries : 2200-3311

備註:

(1)以上價目表僅列出血管外科診斷治療中心的基本收費，以供參考。以上費用並不包括醫生特別檢查/手術、藥費、治療、物料及療程。

(2)如有查詢請向血管外科診斷治療中心職員聯絡。查詢：2200-3311



| General X-ray Examination X光檢查 |            |                                       |   |                                     |  |                     |                     |
|--------------------------------|------------|---------------------------------------|---|-------------------------------------|--|---------------------|---------------------|
| Particulars                    | 項目         | Standard Wards<br>In-patient<br>標準房收費 | Semi-Private Room<br>In-patient<br>半私家房收費 | Private Room<br>In-patient<br>私家房收費 | Subsidized wards<br>In-patient<br>資助病房收費 | Out-patient<br>門診收費 | No. of View<br>照片數目 |
| <b>HEAD</b>                    | <b>頭部</b>  |                                       |   |                                     |  |                     |                     |
| Facial Bones                   | 面骨         | \$780                                 | \$1,080                                   | \$1,200                             | \$540                                    | \$780               | 3                   |
| Nasal Bone                     | 鼻骨         | \$260                                 | \$360                                     | \$400                               | \$180                                    | \$260               | 1                   |
| Sinuses                        | 鼻竇         | \$780                                 | \$1,080                                   | \$1,200                             | \$540                                    | \$780               | 3                   |
| Skull                          | 頭骨         | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| <b>THORAX</b>                  | <b>胸部</b>  |                                       |   |                                     |  |                     |                     |
| Chest                          | 肺部         | \$260                                 | \$360                                     | \$400                               | \$180                                    | \$260               | 1                   |
| Clavicle                       | 鎖骨         | \$260                                 | \$360                                     | \$400                               | \$180                                    | \$260               | 1                   |
| Sternum                        | 胸骨         | \$260                                 | \$360                                     | \$400                               | \$180                                    | \$260               | 1                   |
| <b>ABDOMEN</b>                 | <b>腹部</b>  |                                       |   |                                     |  |                     |                     |
| Abdomen                        | 腹部         | \$260                                 | \$360                                     | \$400                               | \$180                                    | \$260               | 1                   |
| KUB                            | 泌尿系統       | \$260                                 | \$360                                     | \$400                               | \$180                                    | \$260               | 1                   |
| Pelvis                         | 盆骨         | \$260                                 | \$360                                     | \$400                               | \$180                                    | \$260               | 1                   |
| <b>SPINE</b>                   | <b>脊椎骨</b> |                                       |   |                                     |  |                     |                     |
| Cervical Spine                 | 頸椎骨        | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Thoracic Spine                 | 胸椎骨        | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Lumbar Spine                   | 腰椎骨        | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| <b>EXTREMITIES</b>             | <b>肢</b>   |                                       |   |                                     |  |                     |                     |
| Ankle                          | 足踝         | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Elbow                          | 手肘         | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Femur                          | 股骨         | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Foot                           | 足部         | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Forearm                        | 前臂         | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Hand                           | 手部         | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Hip                            | 髖關節        | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Humerus                        | 肱骨         | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| Knee                           | 膝          | \$520                                 | \$720                                     | \$800                               | \$360                                    | \$520               | 2                   |
| <b>OTHERS</b>                  | <b>其他</b>  |                                       |   |                                     |  |                     |                     |
| Bone Age (each)                | 骨齡         | \$260                                 | \$360                                     | \$400                               | \$180                                    | \$260               | 1                   |
| Skeletal Survey                | 全骨骼檢查      | \$3,640                               | \$5,040                                   | \$5,600                             | \$2,520                                  | \$3,640             | 14                  |



| <b>Fluoroscopy X-ray Examination</b><br><b>X光透視檢查</b> |             |  |  |  |   |                                   |
|---|-------------|--|--|--|---|-----------------------------------|
| <u>Particulars</u>                                    | <u>項目</u>   | <u>Standard Wards</u><br><u>In-patient</u><br><u>標準房收費</u> | <u>Semi-Private Room</u><br><u>In-patient</u><br><u>半私家房收費</u> | <u>Private Room</u><br><u>In-patient</u><br><u>私家房收費</u> | <u>Subsidized wards</u><br><u>In-patient</u><br><u>資助病房收費</u> | <u>Out-patient</u><br><u>門診收費</u> |
| <b>ALIMENTARY TRACT</b>                               | <b>腸胃系統</b> |  |  |  |   |                                   |
| Barium Enema  | 鋇劑大腸造影      | \$3,800  | \$5,320  | \$5,890  | \$2,660   | \$3,800                           |
| Barium Meal   | 鋇劑胃及十二指腸造影  | \$1,800  | \$2,520  | \$2,790  | \$1,260   | \$1,800                           |
| Barium Swallow  | 鋇劑食道造影      | \$1,800  | \$2,520  | \$2,790  | \$1,260   | \$1,800                           |
| <b>GENITO-URINARY TRACT #</b>                         | <b>泌尿系統</b> |  |  |  |   |                                   |
| H.S.G.  | 子宮輸卵管造影     | \$3,800  | \$5,320  | \$5,890  | \$2,660   | \$3,800                           |
| Cystogram   | 膀胱造影        | \$1,500  | \$2,100  | \$2,320  | \$1,050   | \$1,500                           |
| Urethrogram   | 尿道造影        | \$3,200  | \$4,480  | \$4,960  | \$2,240   | \$3,200                           |
| Voiding Cystogram                                     | 排尿膀胱造影      | \$4,000  | \$5,600  | \$6,200  | \$2,800   | \$4,000                           |
| <b>OTHERS #</b>                                       | <b>其他</b>   |  |  |  |   |                                   |
| Sialogram (Each side)                                 | 涎管造影 (每邊)   | \$3,200  | \$4,480  | \$4,960  | \$2,240   | \$3,200                           |
| Sinogram  | 竇造影         | \$3,200  | \$4,480  | \$4,960  | \$2,240   | \$3,200                           |
| # Related consumables are not included. 不包括相關消耗品      |             |  |  |  |   |                                   |

Remarks:

- (1) Surcharges will be levied if services are required outside office hours or during holidays.
- (2) The above table only shows the charges of common General X-ray Examination and Contrast X-ray Examination. All information should be used for reference only.
- (3) Please contact X-Ray & Ultrasound Department staff for further enquires. Enquiries : 2200-3112

備註:

- (1) 非辦公時間及公眾假期之服務將加收附加費。
- (2) 以上價目表僅列出 常見的X光檢查和造影劑X光檢查之收費，以供參考。
- (3) 如有查詢請向X光及超聲波檢查部職員聯絡。查詢 : 2200-3112



| Breast Imaging Examination<br>乳房造影檢查 |                   |   |   |   |  |                            |
|--------------------------------------|-------------------|---|---|---|--|----------------------------|
| <u>Particulars</u>                   | 項目                | <u>Standard Wards</u><br><u>In-patient</u><br>標準房收費 | <u>Semi-Private Room</u><br><u>In-patient</u><br>半私家房收費 | <u>Private Room</u><br><u>In-patient</u><br>私家房收費 | <u>Subsidized wards</u><br><u>In-patient</u><br>資助病房收費 | <u>Out-patient</u><br>門診收費 |
| Mammogram (2D)                       | 乳房造影 (2D)         | \$1,450   | \$2,030   | \$2,240   | \$1,015  | \$1,450                    |
| Mammogram (3D) & Ultrasound          | 乳房造影 (2D) 及 乳房超聲波 | \$2,500   | \$3,500   | \$3,870   | \$1,750  | \$2,500                    |
| Mammogram (3D)                       | 乳房造影 (3D)         | \$2,600   | \$3,640   | \$4,030   | \$1,820  | \$2,600                    |
| Mammogram (3D) & Ultrasound          | 乳房造影 (3D) 及 乳房超聲波 | \$3,700   | \$5,180   | \$5,730   | \$6,290  | \$3,700                    |
| Ductogram                            | 乳管造影              | \$3,900   | \$5,460   | \$6,040   | \$2,730  | \$3,900                    |

| Ultrasound Examination<br>超聲波檢查          |                |   |   |   |  |                            |
|--|----------------|---|---|---|--|----------------------------|
| <u>Particulars</u>                       | 項目             | <u>Standard Wards</u><br><u>In-patient</u><br>標準房收費 | <u>Semi-Private Room</u><br><u>In-patient</u><br>半私家房收費 | <u>Private Room</u><br><u>In-patient</u><br>私家房收費 | <u>Subsidized wards</u><br><u>In-patient</u><br>資助病房收費 | <u>Out-patient</u><br>門診收費 |
| Whole Abdomen                            | 全腹部            | \$3,500   | \$4,900   | \$5,420   | \$2,450  | \$3,500                    |
| Upper Abdomen                            | 上腹部            | \$2,380   | \$3,330   | \$3,680   | \$1,665  | \$2,380                    |
| Kidneys                                  | 腎臟             | \$1,000   | \$1,400   | \$1,550   | \$700  | \$1,000                    |
| Liver & Gallbladder                      | 肝臟及膽囊          | \$1,200   | \$1,680   | \$1,860   | \$840  | \$1,200                    |
| Thyroid                                  | 甲狀腺            | \$1,100   | \$1,540   | \$1,700   | \$770  | \$1,100                    |
| Breasts                                  | 乳房             | \$1,200   | \$1,680   | \$1,860   | \$840  | \$1,200                    |
| Carotid Doppler Ultrasound (Bilateral)   | 頸動脈多普勒超聲 (雙側)  | \$3,500   | \$4,900   | \$5,420   | \$2,450  | \$3,500                    |
| Deep Vein Doppler Ultrasound (Each side) | 深層靜脈多普勒超聲 (每邊) | \$3,200   | \$4,480   | \$4,960   | \$2,240  | \$3,200                    |

Remarks:

(1) Surcharges will be levied if services are required outside office hours or during holidays.

(2) The above table only shows the charges of common Mammography and Ultrasound Examination. All information should be used for reference only.

(3) Please contact X-Ray & Ultrasound Department staff for further enquires. Enquiries : 2200-3112



ST. TERESA'S HOSPITAL  
聖德肋撒醫院

| Heart and Diagnostic Centre (Cardiac CT Scan)<br>心臟及診斷中心 (心臟電腦掃描) |                           |  |                                     |   |                                     |   |                                     |                                  |                                     |
|---|---------------------------|--|-------------------------------------|---|-------------------------------------|---|-------------------------------------|----------------------------------|-------------------------------------|
| <u>Cardiac</u> 心臟   |                           | <u>Standard Wards</u><br><u>In-patient/Basic Rate</u><br>標準房收費 /基本收費 |                                     | <u>Semi-Private Room</u><br><u>In-patient</u><br>半私家房收費 |                                     | <u>Private Room</u><br><u>In-patient</u><br>私家房收費 |                                     | <u>Subsidized Ward</u><br>資助病房收費 |                                     |
| Particulars   | 項目                        | Plain<br>平掃描   | Plain + Contrast<br>平掃描 +<br>顯影加強掃描 | Plain<br>平掃描  | Plain + Contrast<br>平掃描 +<br>顯影加強掃描 | Plain<br>平掃描                                      | Plain + Contrast<br>平掃描 +<br>顯影加強掃描 | Plain<br>平掃描                     | Plain + Contrast<br>平掃描 +<br>顯影加強掃描 |
| Coronary Angiogram<br>(Calcium Score included)                    | 冠狀動脈血管造影<br>(包括冠狀動脈鈣化評分)  | N/A  | \$8,000                             | N/A   | \$11,200                            | N/A   | \$12,400                            | N/A                              | \$5,600                             |
| Calcium Score for<br>Coronary Artery                              | 冠狀動脈鈣化評分                  | \$2,400  | N/A                                 | \$3,400   | N/A                                 | \$3,700   | N/A                                 | \$1,700                          | N/A                                 |
| CABG  | 冠狀動脈搭橋電腦掃描                | N/A  | \$8,500                             | N/A   | \$11,900                            | N/A   | \$12,750                            | N/A                              | \$5,950                             |
| Triple Rule Out   | 冠狀動脈 + 胸主動脈 + 肺動<br>脈電腦掃描 | N/A  | \$15,400                            | N/A   | \$21,600                            | N/A   | \$23,900                            | N/A                              | \$13,860                            |

Remarks:

N/A = Not Applicable 不適用

- (1) Surcharges will be levied for emergency services or services are required outside office hours.
- (2) The above table only shows the charges of common chargeable items. All information should be used for reference only.
- (3) Please contact Heart and Diagnostic Centre for further enquires. Enquiries : 2200-3122.

備註:

- (1) 緊急服務及在非辦公時間之服務將加收附加費。
- (2) 以上價目表僅列出常用項目之收費，只供參考。
- (3) 如有查詢請與心臟及診斷中心聯絡。查詢: 2200-3122。



| Scanning Department<br>掃描部                        |   |                                  |   |                                  |   |                                  |   |                                  |
|---|---|----------------------------------|---|----------------------------------|---|----------------------------------|---|----------------------------------|
| CT<br>電腦掃描  | <u>Standard Wards</u><br><u>In-patient/Basic Rate</u><br>標準房收費 / 基本收費 |                                  | <u>Semi-Private Room</u><br><u>In-patient</u><br>半私家房收費 |                                  | <u>Private Room</u><br><u>In-patient</u><br>私家房收費 |                                  | <u>Subsidized Ward</u><br><u>資助病房收費</u> |                                  |
|   | Plain<br>平掃描  | Plain + Contrast<br>平掃描 + 顯影加強掃描 | Plain<br>平掃描  | Plain + Contrast<br>平掃描 + 顯影加強掃描 | Plain<br>平掃描                                      | Plain + Contrast<br>平掃描 + 顯影加強掃描 | Plain<br>平掃描                            | Plain + Contrast<br>平掃描 + 顯影加強掃描 |
| Brain 腦   | \$2,100   | \$3,900                          | \$2,900   | \$5,500                          | \$3,300   | \$6,000                          | \$1,450                                 | \$2,750                          |
| Paranasal Sinuses 鼻竇                              | \$3,720   | \$5,480                          | \$5,200   | \$7,700                          | \$5,800   | \$8,500                          | \$2,600                                 | \$3,850                          |
| Thorax: Low Dose Screening<br>胸部 (低劑量篩檢)          | \$2,100   | N / A                            | \$2,900   | N / A                            | \$3,300   | N / A                            | \$1,450                                 | N / A                            |
| Thorax 胸部<br>(High Resolution Technique included) | \$3,180   | \$5,900                          | \$4,500   | \$8,300                          | \$4,900   | \$9,100                          | \$2,250                                 | \$4,150                          |
| Abdomen 腹   | \$3,180   | \$5,900                          | \$4,500   | \$8,300                          | \$4,900   | \$9,100                          | \$2,250                                 | \$4,150                          |
| Pelvis 盆腔   | \$3,180   | \$5,900                          | \$4,500   | \$8,300                          | \$4,900   | \$9,100                          | \$2,250                                 | \$4,150                          |
| CT Urogram 尿路造影                                   | \$3,900   | \$7,500                          | \$5,500   | \$10,500                         | \$6,000   | \$11,600                         | \$2,750                                 | \$5,250                          |
| Coronary Angiogram 冠狀動脈血管造影                       | N / A   | \$8,000                          | N / A   | \$11,200                         | N / A   | \$12,400                         | N / A                                   | \$5,600                          |

Remarks:

N/A = Not Applicable 不適用

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| Scanning Department<br>掃描部   |   |                                  |   |                                  |                                     |                                  |                           |                                  |
|--|---|----------------------------------|---|----------------------------------|-------------------------------------|----------------------------------|---------------------------|----------------------------------|
| MR<br>磁力共振掃描   | Standard Wards<br>In-patient/Basic Rate<br>標準房收費/基本收費 |                                  | Semi-Private Room<br>In-patient<br>半私家房收費 |                                  | Private Room<br>In-patient<br>私家房收費 |                                  | Subsidized Ward<br>資助病房收費 |                                  |
|  | Plain<br>平掃描  | Plain + Contrast<br>平掃描 + 顯影加強掃描 | Plain<br>平掃描                              | Plain + Contrast<br>平掃描 + 顯影加強掃描 | Plain<br>平掃描                        | Plain + Contrast<br>平掃描 + 顯影加強掃描 | Plain<br>平掃描              | Plain + Contrast<br>平掃描 + 顯影加強掃描 |
| Brain 腦  | \$6,260   | \$10,100                         | \$8,800                                   | \$14,100                         | \$9,700                             | \$15,700                         | \$4,400                   | \$7,050                          |
| Nasopharynx 鼻咽   | \$6,260   | \$10,100                         | \$8,800                                   | \$14,100                         | \$9,700                             | \$15,700                         | \$4,400                   | \$7,050                          |
| Pituitary 腦下垂體   | \$6,260   | \$10,100                         | \$8,800                                   | \$14,100                         | \$9,700                             | \$15,700                         | \$4,400                   | \$7,050                          |
| MRA of Brain 腦血管造影   | \$5,160   | \$6,900                          | \$7,200                                   | \$9,700                          | \$8,000                             | \$10,700                         | \$3,600                   | \$4,850                          |
| MRA Brain & Neck (down to aortic arch)<br>腦及頸血管造影 (至主動脈弓)  | N / A   | \$7,460                          | N / A                                     | \$10,400                         | N / A                               | \$11,600                         | N / A                     | \$5,200                          |
| Stroke Assessment ( Plain MRI Brain + MRA Brain & Neck )<br>平掃描腦部 + 腦及頸血管造影 (至主動脈弓)              | N / A   | \$12,060                         | N / A                                     | \$16,900                         | N / A                               | \$18,700                         | N / A                     | \$8,450                          |
| One Region of Spine 一段脊椎 (頸椎/胸椎/腰椎 )<br>( Cervical Spine / Thoracic Spine / Lumbar Spine )       | \$6,260   | \$10,100                         | \$8,800                                   | \$14,100                         | \$9,700                             | \$15,700                         | \$4,400                   | \$7,050                          |
| One Joint 一邊關節 ( 右或左 - 肩/肘/手腕/髖/膝蓋/腳踝 )<br>(Right / Left - Shoulder/Elbow/Wrist/Hip/Knee/Ankle ) | \$6,260   | \$10,100                         | \$8,800                                   | \$14,100                         | \$9,700                             | \$15,700                         | \$4,400                   | \$7,050                          |
| Breasts 乳房   | \$7,000   | \$10,840                         | \$9,800                                   | \$15,200                         | \$10,900                            | \$16,800                         | \$4,900                   | \$7,600                          |
| Abdomen 腹部 / Pelvis 盆腔   | \$7,000   | \$10,840                         | \$9,800                                   | \$15,200                         | \$10,900                            | \$16,800                         | \$4,900                   | \$7,600                          |
| Abdomen & Pelvis 腹部及盆腔   | \$12,800  | \$19,500                         | \$17,900                                  | \$27,300                         | \$19,800                            | \$30,200                         | \$8,950                   | \$13,650                         |
| MR Cholangio-pancreatogram (MRCP) 膽管造影   | \$6,600   | N / A                            | \$9,200                                   | N / A                            | \$10,200                            | N / A                            | \$4,600                   | N / A                            |
| Whole Body Screening (without contrast) 全身篩檢   | \$14,700  | N / A                            | \$20,600                                  | N / A                            | \$22,800                            | N / A                            | \$10,300                  | N / A                            |
| Contrast Enhanced Angiogram  | Plain<br>平掃描  | Contrast<br>顯影加強掃描               | Plain<br>平掃描                              | Contrast<br>顯影加強掃描               | Plain<br>平掃描                        | Contrast<br>顯影加強掃描               | Plain<br>平掃描              | Contrast<br>顯影加強掃描               |
| Pulmonary / Thoracic / Abdominal Angiogram<br>肺動脈 / 胸部 / 腹部 血管造影                                 | N / A   | \$7,900                          | N / A                                     | \$11,100                         | N / A                               | \$12,200                         | N / A                     | \$5,550                          |
| Peripheral MRA(whole lower limbs) 下肢血管造影   | N / A   | \$10,100                         | N / A                                     | \$14,100                         | N / A                               | \$15,700                         | N / A                     | \$7,050                          |
| Cardiac (Full Ischaemic Heart Assessment) 心臟   | N / A   | \$12,500                         | N / A                                     | \$17,500                         | N / A                               | \$19,400                         | N / A                     | \$8,750                          |

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| Clinical Laboratory 臨床病理化驗 |              |                                       |   |                                     |  |                     |
|----------------------------|--------------|---------------------------------------|---|-------------------------------------|--|---------------------|
| Particulars                | 項目           | Standard Wards<br>In-patient<br>標準房收費 | Semi-Private Room<br>In-patient<br>半私家房收費 | Private Room<br>In-patient<br>私家房收費 | Subsidized wards<br>In-patient<br>資助病房收費 | Out-patient<br>門診收費 |
| <b>Renal Function Test</b> | <b>腎功能</b>   | \$690                                 | \$970                                     | \$1,070                             | \$485                                    | \$690               |
| Urea                       | 尿素           |                                       |   |                                     |  |                     |
| Creatinine                 | 肌酸酐          |                                       |   |                                     |  |                     |
| Protein, Total             | 總蛋白質         |                                       |   |                                     |  |                     |
| Albumin                    | 白蛋白          |                                       |   |                                     |  |                     |
| A/G Ratio                  | 白蛋白對球蛋白比率    |                                       |   |                                     |  |                     |
| Sodium                     | 鈉            |                                       |   |                                     |  |                     |
| Potassium                  | 鉀            |                                       |   |                                     |  |                     |
| Chloride                   | 氯            |                                       |   |                                     |  |                     |
| Bicarbonate                | 重碳酸鹽         |                                       |   |                                     |  |                     |
| <b>Liver Function Test</b> | <b>肝功能</b>   | \$690                                 | \$970                                     | \$1,070                             | \$485                                    | \$690               |
| Protein, Total             | 總蛋白質         |                                       |   |                                     |  |                     |
| Albumin                    | 白蛋白          |                                       |   |                                     |  |                     |
| A/G Ratio                  | 白蛋白對球蛋白比率    |                                       |   |                                     |  |                     |
| Alkaline Phosphatase (ALP) | 鹼性磷酸酵素       |                                       |   |                                     |  |                     |
| Gamma - G T (G G T)        | 丙種谷氨轉移酵素     |                                       |   |                                     |  |                     |
| S G P T (A L T)            | 谷丙轉氨酵素       |                                       |   |                                     |  |                     |
| S G O T (A S T)            | 谷草轉氨酵素       |                                       |   |                                     |  |                     |
| Bilirubin, T o t a l       | 總膽紅素         |                                       |   |                                     |  |                     |
| <b>Lipid Profile</b>       | <b>血脂肪檢查</b> | \$900                                 | \$1,260                                   | \$1,395                             | \$630                                    | \$900               |
| Cholesterol, Total         | 總膽固醇         |                                       |   |                                     |  |                     |
| HDL Cholesterol            | 高密度膽固醇       |                                       |   |                                     |  |                     |
| Triglycerides              | 三酸甘油脂        |                                       |   |                                     |  |                     |
| LDL-Cholesterol            | 低密度膽固醇       |                                       |   |                                     |  |                     |
| <b>Arthritis Profile</b>   | <b>關節炎檢查</b> | \$820                                 | \$1,150                                   | \$1,275                             | \$575                                    | \$820               |
| Uric Acid                  | 尿酸           |                                       |   |                                     |  |                     |
| Calcium                    | 鈣            |                                       |   |                                     |  |                     |
| Inorganic Phosphorus       | 無機磷          |                                       |   |                                     |  |                     |
| RA factor                  | 類風濕關節因子      |                                       |   |                                     |  |                     |
| C-Reactive Protein         | 丙種反應蛋白       |                                       |   |                                     |  |                     |



| Particulars                            | 項目               | Standard Wards<br>In-patient<br>標準房收費 | Semi-Private Room<br>In-patient<br>半私家房收費 | Private Room<br>In-patient<br>私家房收費 | Subsidized wards<br>In-patient<br>資助病房收費 | Out-patient<br>門診收費 |
|--|------------------|---------------------------------------|---|-------------------------------------|--|---------------------|
| <b>Cardiac Profile</b>                 | <b>心臟組合檢查</b>    | \$1,090                               | \$1,530                                   | \$1,690                             | \$765                                    | \$1,090             |
| CK                                     | 肌酸磷酸激酶           |                                       |   |                                     |  |                     |
| CK-MB                                  | 心肌性酸磷酸激酶         |                                       |   |                                     |  |                     |
| LDH                                    | 乳酸脫氫酶            |                                       |   |                                     |  |                     |
| S G O T (A S T)                        | 谷草轉氨酶            |                                       |   |                                     |  |                     |
| Troponin I (TnI)                       | 肌鈣蛋白 I           |                                       |   |                                     |  |                     |
| <b>Antenatal Screening+HIV Profile</b> | <b>產前檢查</b>      | \$1,800                               | \$2,520                                   | \$2,790                             | \$1,260                                  | \$1,800             |
| Complete Blood Picture                 | 全血計數             |                                       |   |                                     |  |                     |
| ABO Group & Rh(D) Type                 | 血型及恆猴因子          |                                       |   |                                     |  |                     |
| Rubella antidody-IgG                   | 德國麻疹抗體-IgG       |                                       |   |                                     |  |                     |
| Hep. Bs antigen                        | 乙型肝炎表面抗原         |                                       |   |                                     |  |                     |
| HIV Ag/Ab Combo                        | 愛滋病毒抗原及抗體        |                                       |   |                                     |  |                     |
| Syphilis antibody                      | 梅毒抗體             |                                       |   |                                     |  |                     |
| <b>Fertility Profile</b>               | <b>生育荷爾蒙檢查</b>   | \$1,560                               | \$2,180                                   | \$2,420                             | \$1,090                                  | \$1,560             |
| FSH                                    | 卵泡刺激素            |                                       |   |                                     |  |                     |
| LH                                     | 黃體生成激素           |                                       |   |                                     |  |                     |
| Prolactin                              | 催乳素              |                                       |   |                                     |  |                     |
| <b>Coronary Risk Profile</b>           | <b>冠心病風險檢查</b>   | \$1,600                               | \$2,240                                   | \$2,480                             | \$1,120                                  | \$1,600             |
| Cholesterol, Total                     | 總膽固醇             |                                       |   |                                     |  |                     |
| HDL Cholesterol                        | 高密度膽固醇           |                                       |   |                                     |  |                     |
| Triglycerides                          | 三酸甘油脂            |                                       |   |                                     |  |                     |
| LDL-Cholesterol                        | 低密度膽固醇           |                                       |   |                                     |  |                     |
| Homocysteine                           | 同型半胱氨酸           |                                       |   |                                     |  |                     |
| C-Reactive Protein                     | 丙種反應蛋白           |                                       |   |                                     |  |                     |
| <b>Thyroid Function Profile</b>        | <b>甲狀腺功能檢查</b>   | \$1,020                               | \$1,430                                   | \$1,585                             | \$715                                    | \$1,020             |
| Free T4                                | 游離四碘甲狀腺氨酸        |                                       |   |                                     |  |                     |
| TSH                                    | 促甲狀腺激素           |                                       |   |                                     |  |                     |
| <b>Immunoglobulin Profile</b>          | <b>免疫球蛋白組合檢查</b> | \$1,375                               | \$1,930                                   | \$2,135                             | \$965                                    | \$1,375             |
| IgA                                    | 免疫球蛋白 A          |                                       |   |                                     |  |                     |
| IgG                                    | 免疫球蛋白 G          |                                       |   |                                     |  |                     |
| IgM                                    | 免疫球蛋白M           |                                       |   |                                     |  |                     |



| <u>Particulars</u>                      | <u>項目</u>            | <u>Standard Wards</u><br><u>In-patient</u><br><u>標準房收費</u> | <u>Semi-Private Room</u><br><u>In-patient</u><br><u>半私家房收費</u> | <u>Private Room</u><br><u>In-patient</u><br><u>私家房收費</u> | <u>Subsidized wards</u><br><u>In-patient</u><br><u>資助病房收費</u> | <u>Out-patient</u><br><u>門診收費</u> |
|---|----------------------|--|--|--|---|-----------------------------------|
| <b>Coagulation Profile</b>              | <b>凝血功能檢查</b>        | \$700  | \$980  | \$1,085  | \$490   | \$700                             |
| Activated Partial Thromboplastin Time   | 部份凝血素時間              |  |  |  |   |                                   |
| Prothrombin Time& INR                   | 凝血酵素原時間              |  |  |  |   |                                   |
| Fibrinogen                              | 纖維素原                 |  |  |  |   |                                   |
| <b>Rapid Test for Flu A &amp; B RNA</b> | <b>流感甲及乙型RNA快速測試</b> | \$770  | \$1,080  | \$1,195  | \$540   | \$770                             |
| Influenza A Antigen                     | 甲型流感抗原               |  |  |  |   |                                   |
| Influenza B Antigen                     | 乙型流感抗原               |  |  |  |   |                                   |
| <b>Upper Respiratory PCR</b>            | <b>上呼吸道病毒基因測試</b>    | \$2,750  | \$3,850  | \$4,265  | \$1,925   | \$2,750                           |
| Influenza A                             | 甲型流感病毒               |  |  |  |   |                                   |
| Influenza A H1-2009                     | 甲型流感病毒 H1-2009       |  |  |  |   |                                   |
| Influenza A H1                          | 甲型流感病毒 H1            |  |  |  |   |                                   |
| Influenza A H3                          | 甲型流感病毒 H3            |  |  |  |   |                                   |
| Influenza B                             | 乙型流感病毒               |  |  |  |   |                                   |
| Adenovirus                              | 腺病毒                  |  |  |  |   |                                   |
| Coronavirus 229E                        | 人類冠狀病毒 229E          |  |  |  |   |                                   |
| Coronavirus HKU1                        | 人類冠狀病毒 HKU1          |  |  |  |   |                                   |
| Coronavirus NL63                        | 人類冠狀病毒NL63           |  |  |  |   |                                   |
| Coronavirus OC43                        | 人類冠狀病毒OC43           |  |  |  |   |                                   |
| Human metapneumovirus                   | 人偏肺病毒                |  |  |  |   |                                   |
| Human rhinovirus / enterovirus          | 人鼻病毒 / 腸病毒           |  |  |  |   |                                   |
| Parainfluenza virus 1                   | 副流行性感冒病毒 第一型         |  |  |  |   |                                   |
| Parainfluenza virus 2                   | 副流行性感冒病毒 第二型         |  |  |  |   |                                   |
| Parainfluenza virus 3                   | 副流行性感冒病毒 第三型         |  |  |  |   |                                   |
| Parainfluenza virus 4                   | 副流行性感冒病毒 第四型         |  |  |  |   |                                   |
| Respiratory syncytial virus             | 呼吸道合胞病毒              |  |  |  |   |                                   |
| Bordetella parapertussis (IS1001)       | 副百日咳菌 (IS1001)       |  |  |  |   |                                   |
| Bordetella pertussis (ptxp)             | 百日咳菌 (ptxp)          |  |  |  |   |                                   |
| Chlamydia pneumoniae                    | 肺炎披衣菌                |  |  |  |   |                                   |
| Mycoplasma pneumoniae                   | 肺炎支原體                |  |  |  |   |                                   |
| <b>Gastroenteritis Package</b>          | <b>胃腸炎組合檢查</b>       | \$2,465  | \$3,450  | \$3,820  | \$1,725   | \$2,465                           |
| Stool Routine                           | 大便常規檢查               |  |  |  |   |                                   |
| Gastrointestinal PCR                    | 胃腸炎病原體基因測試           |  |  |  |   |                                   |
| <b>Diabetes Profile</b>                 | <b>糖尿病檢查</b>         |  |  |  |   |                                   |
| Glucose (Fasting)                       | 血葡萄糖(空肚)             | \$630  | \$880  | \$980  | \$440   | \$630                             |
| HbA1c                                   | 糖化血色素                |  |  |  |   |                                   |
| Urine Glucose                           | 小便葡萄糖                |  |  |  |   |                                   |



| Particulars                   | 項目             | Standard Wards<br>In-patient<br>標準房收費 | Semi-Private Room<br>In-patient<br>半私家房收費 | Private Room<br>In-patient<br>私家房收費 | Subsidized wards<br>In-patient<br>資助病房收費 | Out-patient<br>門診收費 |
|-------------------------------|----------------|---------------------------------------|---|-------------------------------------|--|---------------------|
| <b>Infant allergy Panel</b>   | <b>幼兒過敏原組合</b> | \$1,250                               | \$1,750                                   | \$1,920                             | \$875                                    | \$1,250             |
| IgE                           | 總免疫球蛋白E        |                                       |   |                                     |  |                     |
| House dust mite mix(hx2)      | 混合塵蟎           |                                       |   |                                     |  |                     |
| Cat dander (e1)               | 貓毛             |                                       |   |                                     |  |                     |
| Dog dander (e5)               | 狗毛             |                                       |   |                                     |  |                     |
| Mould mix (mx2)               | 混合霉            |                                       |   |                                     |  |                     |
| General food mix (fx5)        | 混合普通食物         |                                       |   |                                     |  |                     |
| Rice (f9)                     | 米              |                                       |   |                                     |  |                     |
| Sea food mix (fx2)            | 混合海鮮           |                                       |   |                                     |  |                     |
| Meat mix (fx23)               | 混合肉類           |                                       |   |                                     |  |                     |
| <b>STD Package</b>            | <b>性傳染疾病組合</b> | \$2,690                               | \$3,770                                   | \$4,170                             | \$1,885                                  | \$2,690             |
| Chlamydia antibody            | 衣原體抗體          |                                       |   |                                     |  |                     |
| HIV I & II antibody           | 愛滋病毒抗體(I及II型)  |                                       |   |                                     |  |                     |
| HSV-II antibody               | 疱疹病毒II型抗體      |                                       |   |                                     |  |                     |
| Syphilis antibody             | 梅毒抗體           |                                       |   |                                     |  |                     |
| VDRL                          | 梅毒血清試驗         |                                       |   |                                     |  |                     |
| <b>Complete Blood Picture</b> | <b>全血計數</b>    | \$230                                 | \$320                                     | \$360                               | \$160                                    | \$230               |
| WBC count                     | 白血球計數          |                                       |   |                                     |  |                     |
| RBC count                     | 紅血球計數          |                                       |   |                                     |  |                     |
| Hemoglobin                    | 血紅素            |                                       |   |                                     |  |                     |
| Hematocrit                    | 紅血球壓積量         |                                       |   |                                     |  |                     |
| MCV                           | 紅血球平均容積        |                                       |   |                                     |  |                     |
| MCH                           | 紅血球血紅素平均值      |                                       |   |                                     |  |                     |
| MCHC                          | 紅血球血紅素平均濃度     |                                       |   |                                     |  |                     |
| RDW                           | 紅血球體積分佈闊度      |                                       |   |                                     |  |                     |
| Platelet                      | 血小板            |                                       |   |                                     |  |                     |
| WBC differential count        | 白血球分類計數        |                                       |   |                                     |  |                     |
| <b>VDRL</b>                   | <b>梅毒血清試驗</b>  | \$170                                 | \$240                                     | \$265                               | \$120                                    | \$170               |
| <b>Tumor Marker (Female)</b>  | <b>癌指標(女性)</b> | \$6,390                               | \$8,950                                   | \$9,905                             | \$4,475                                  | \$6,390             |
| Carcinoembryonic Antigen      | 癌胚抗原           |                                       |   |                                     |  |                     |
| CA 19.9                       | 癌抗原19.9 (胰臟)   |                                       |   |                                     |  |                     |
| CA 125                        | 癌抗原125 (卵巢)    |                                       |   |                                     |  |                     |
| CA 15.3                       | 癌抗原15.3 (乳房)   |                                       |   |                                     |  |                     |
| SCC (TA-4)                    | 鱗狀細胞癌抗原        |                                       |   |                                     |  |                     |
| Alpha Fetoprotein             | 甲種胎兒蛋白         |                                       |   |                                     |  |                     |
| EBV DNA RT PCR                | EB病毒DNA測試      |                                       |   |                                     |  |                     |



| <u>Particulars</u>                     | <u>項目</u>          | <u>Standard Wards</u><br><u>In-patient</u><br><u>標準房收費</u> | <u>Semi-Private Room</u><br><u>In-patient</u><br><u>半私家房收費</u> | <u>Private Room</u><br><u>In-patient</u><br><u>私家房收費</u> | <u>Subsidized wards</u><br><u>In-patient</u><br><u>資助病房收費</u> | <u>Out-patient</u><br><u>門診收費</u> |
|--|--------------------|--|--|--|---|-----------------------------------|
| <b>Tumor Marker (Male)</b>             | <b>癌指標(男性)</b>     | \$5,100  | \$7,140  | \$7,905  | \$3,570   | \$5,100                           |
| Alpha Fetoprotein                      | 甲種胎兒蛋白             |  |  |  |   |                                   |
| CA 19.9                                | 癌抗原19.9 (胰臟)       |  |  |  |   |                                   |
| Carcinoembryonic Antigen               | 癌胚抗原               |  |  |  |   |                                   |
| EBV DNA RT PCR                         | EB病毒DNA測試          |  |  |  |   |                                   |
| PSA (free & total)                     | 游離及總前列腺特殊抗原        |  |  |  |   |                                   |
| SCC (TA-4)                             | 鱗狀細胞癌抗原            |  |  |  |   |                                   |
| <b>ABO Group &amp; Rh(D) Type</b>      | <b>血型及恆猴因子</b>     | \$240  | \$340  | \$375  | \$170   | \$240                             |
| <b>Glucose</b>                         | <b>血葡萄糖</b>        | \$185  | \$260  | \$290  | \$130   | \$185                             |
| <b>Culture &amp; Sensitivity Test</b>  | <b>細菌培養及藥物敏感試驗</b> | \$510  | \$710  | \$790  | \$355   | \$510                             |
| <b>Urine Routine</b>                   | <b>小便常規檢驗</b>      | \$165  | \$230  | \$260  | \$115   | \$165                             |
| <b>Stool Routine</b>                   | <b>大便常規檢驗</b>      | \$165  | \$230  | \$260  | \$115   | \$165                             |
| <b>Helicobacter pylori breath test</b> | <b>幽門螺旋桿菌呼氣測試</b>  | \$965  | \$1,350  | \$1,500  | \$675   | \$965                             |

Remarks:

- (1) Surcharges will be levied for emergency services or services are required outside office hours.
- (2) The above table only shows the charges of common chargeable items of Clinical Laboratory. All information should be used for reference only.
- (3) Please contact Clinical Laboratory staff for further enquires. Enquires : 2200-3110

備註:

- (1) 非辦公時間及公眾假期之服務將加收附加費。
- (2) 以上價目表僅列出臨床病理化驗的常用項目之收費，以供參考。
- (3) 如有查詢請向臨床病理檢驗部(化驗室)職員聯絡。查詢：2200-3110



| <b>Histopathological &amp; Cytological Examination</b><br><b>組織病理及細胞學化驗</b>   |  |   |   |   |  |                            |
|---|--|---|---|---|--|----------------------------|
| <u>Particulars</u>  | 項目   | <u>Standard Wards</u><br><u>In-patient</u><br>標準房收費 | <u>Semi-Private Room</u><br><u>In-patient</u><br>半私家房收費 | <u>Private Room</u><br><u>In-patient</u><br>私家房收費 | <u>Subsidized Wards</u><br><u>In-patient</u><br>資助病房收費 | <u>Out-patient</u><br>門診收費 |
| Routine Examination<br>(Small, excisional)  | 常規檢驗<br>(小標本)                                | \$2,060   | \$2,880   | \$3,190   | \$1,440  | \$2,060                    |
| Routine Examination<br>(Large specimen, standard operations)  | 常規檢驗<br>(大標本, 普通手術)                          | \$4,120   | \$5,770   | \$6,390   | \$2,885  | \$4,120                    |
| Routine Examination<br>(Core Biopsy)  | 常規檢驗<br>(核心活組織檢驗)                            | \$3,090   | \$4,330   | \$4,790   | \$2,165  | \$3,090                    |
| Frozen Section Professional Charge<br>(4 specimens)   | 冰凍檢驗專業服務費 (四個<br>標本, <u>未包括標本費用</u> )        | \$3,020   | \$4,230   | \$4,680   | \$2,115  | \$3,020                    |
| Frozen Section Surcharge,<br>after hours  | 冰凍檢驗專業服務附加費<br>(常規時間以外, <u>未包標本<br/>費用</u> ) | \$1,210   | \$1,690   | \$1,880   | \$845  | \$1,210                    |
| Gynaecological Cytology & HPV   | 子宮頸細胞學及<br>人類乳頭瘤病毒檢驗                         | \$880   | \$1,230   | \$1,360   | \$615  | \$880                      |
| FNA Cytology (per site)   | 幼針穿刺細胞學檢驗<br>(每一位置)                          | \$510   | \$710   | \$790   | \$355  | \$510                      |
| Non-gynecological cytology  | 非婦科細胞學檢驗                                     | \$360   | \$500   | \$560   | \$250  | \$360                      |
| Immunofluorescence  | 免疫螢光檢驗                                       | \$4,910   | \$6,870   | \$7,610   | \$3,435  | \$4,910                    |
| Chromogenic/ Silver in-situ hybridization   | 顯色/ 銀原位雜交檢驗                                  | \$3,120   | \$4,370   | \$4,840   | \$2,185  | \$3,120                    |
| Breast Cancer Markers:<br>ER, PR, Ki-67 & Oncogene  | 乳癌生物標誌測試檢驗                                   | \$2,820   | \$3,950   | \$4,370   | \$1,975  | \$2,820                    |
| Special Breast F/S Package:<br>Lumpectomy including 3 further<br>margins + SLNs (up to 3) + ER +<br>subsequent specimen including<br>axillary dissection±mastectomy | 乳房組織和前哨淋巴結檢驗<br>套餐 (3淋巴結以內)                  | \$12,580  | \$17,610  | \$19,500  | \$8,805  | \$12,580                   |

**Remarks:**

- (1) Surcharges will be levied if services are required outside office hours or during holidays.
- (2) The above table only shows the charges of common chargeable items of Histopathological & Cytological Examination. All information should be used for reference only.
- (3) Please contact Histopathology Laboratory staff for further enquires. Enquiries : 2200-3111

**備註:**

- (1) 非辦公時間及公眾假期之服務將加收附加費。
- (2) 以上價目表僅列出組織病理及細胞學化驗的常用項目之收費, 以供參考。
- (3) 如有查詢請向組織病理化驗部職員聯絡。查詢 : 2200-3111



| <b>Physiotherapy 物理治療</b>   |                         |   |   |   |  |                                   |
|---|-------------------------|---|---|---|--|-----------------------------------|
| <u>Particulars</u>  | <u>項目</u>               | <u>Standard Wards</u><br><u>In-patient</u><br>標準房收費 | <u>Semi-Private Room</u><br><u>In-patient</u><br>半私家房收費 | <u>Private Room</u><br><u>In-patient</u><br>私家房收費 | <u>Subsidized wards</u><br><u>In-patient</u><br>資助病房收費 | <u>Out-patient</u><br><u>門診收費</u> |
| Bedside Traction  | 牽引治療(病房)                | \$470   | \$660   | \$730   | \$330  | \$470                             |
| Chest Physiotherapy(15-30 minutes)  | 胸肺科物理治療 (15-30分鐘)       | \$460 to \$920                                      | \$650 to \$1,300  | \$720 to \$1,440                                  | \$325 to \$650   | \$460 to \$920                    |
| Electrotherapy Modality<br>(Per item or 15 minutes each)                                      | 電療<br>(每項或每15分鐘)        | \$220   | \$310   | \$340   | \$155  | \$220                             |
| Mechanical Traction (15 minutes)  | 牽引治療(機械式) (15分鐘)        | \$220   | \$310   | \$340   | \$155  | \$220                             |
| Hot and Cold Therapy (15 minutes)   | 冷、熱敷治療                  | \$220   | \$310   | \$340   | \$155  | \$220                             |
| Therapeutic Exercise / Conditioning<br>(15-45 minutes)  | 運動治療<br>(15-45分鐘)       | \$220 to \$660                                      | \$310 to \$930  | \$340 to \$1020                                   | \$155 to \$465   | \$220 to \$660                    |
| Manual Therapy (15-45 minutes)  | 手法治療 (15-45分鐘)          | \$270 to \$810                                      | \$380 to \$1,140  | \$420 to \$1,260                                  | \$190 to \$570   | \$270 to \$810                    |
| Gait Training (15-45 minutes)   | 步行訓練 (15-45分鐘)          | \$270 to \$810                                      | \$380 to \$1,140  | \$420 to \$1,260                                  | \$190 to \$570   | \$270 to \$810                    |
| Activity of Daily Living Training (15-45 minutes)   | 日常自理訓練 (15-45分鐘)        | \$270 to \$810                                      | \$380 to \$1,140  | \$420 to \$1,260                                  | \$190 to \$570   | \$270 to \$810                    |
| Extracorporeal Shock Wave Therapy   | 衝擊波治療                   | \$600   | \$840   | \$930   | \$420  | \$600                             |
| Isokinetic Evaluation and Treatment<br>(15-30 minutes)  | 等速式運動評估及治療<br>(15-30分鐘) | \$660   | \$930   | \$1,030   | \$465  | \$660                             |
| Robotic Gait Training (30 minutes)  | 機械人步態訓練 (30分鐘)          | \$1,600   | \$2,240   | \$2,480   | \$1,120  | \$1,600                           |
| Strength and Power; Balance and<br>Coordination Testing / Training Program (15-30<br>minutes) | 肌力、平衡及協調訓練<br>(15-30分鐘) | \$270 to \$540                                      | \$380 to \$760  | \$420 to \$840                                    | \$190 to \$380   | \$270 to \$540                    |

Remarks:

- (1) Surcharges will be levied if services are required outside office hours or during holidays.
- (2) The above table only shows the charges of common chargeable items of Rehabilitation Centre. All information should be used for reference only.
- (3) Please contact Rehabilitation Centre staff for further enquires. Enquires : 2200-3107

備註:

- (1) 非辦公時間及公眾假期之服務將加收附加費。
- (2) 以上價目表僅列出復康中心的常用項目之收費，以供參考。
- (3) 如有查詢請向復康中心職員聯絡。查詢 : 2200-3107

Revision Date 更新日期: 1/7/2025





| Hearing And Speech Centre<br>聽覺及言語治療中心                                   |                   |                                       |  |                                   |  |                     |
|--|-------------------|---------------------------------------|--|-----------------------------------|--|---------------------|
| Particulars  | 項目                | Standard Wards<br>In-patient<br>標準房收費 | Semi-Private<br>Room<br>In-patient<br>半私家房 | Private Room<br>In-patient<br>私家房 | Subsidized wards<br>In-patient<br>資助病房 | Out-patient<br>門診收費 |
| <b>Hearing Services</b>  |                   |                                       |  |                                   |  |                     |
| Pure Tone Audiometry (PTA)   | 純音聽力測驗            | \$680                                 | \$960                                      | \$1,060                           | \$480                                  | \$680               |
| Neonatal Hearing Screening (SCRN)  | 初生嬰兒聽力普查測驗        | \$820                                 | \$1,150                                    | \$1,280                           | \$575                                  | \$820               |
| Package of Auditory Brainstem Response --<br>Threshold Estimation (PABR) | 聽性腦幹反應綜合測驗 – 聽閾評估 | \$2,300                               | \$3,220                                    | \$3,570                           | \$1,610                                | \$2,300             |
| Pediatric Test Battery (PED)<br>(2.5 – 6.5 years old)                    | 兒童聽力綜合評估          | \$1,200                               | \$1,680                                    | \$1,860                           | \$840                                  | \$1,200             |
| <b>Speech Therapy Services</b>   |                   |                                       |  |                                   |  |                     |
| *Swallowing Assessment / Communication Assessment                        | *吞嚥檢查/ 溝通能力評估     | \$1,700                               | \$2,380                                    | \$2,635                           | \$1,190                                | \$1,700             |
| *Swallowing Therapy / Communication Therapy                              | *吞嚥治療 / 溝通障礙治療    | \$1,600                               | \$2,240                                    | \$2,480                           | \$1,120                                | \$1,600             |
| #VFSS (Videofluoroscopic Study of Swallowing)                            | #吞嚥x光檢查           | \$3,000                               | \$4,200                                    | \$4,650                           | \$2,100                                | \$3,000             |

Remarks:

- (1)\*Charges for food are excluded in swallowing assessment / therapy.
- (2)#VFSS examination includes speech therapist consultation but the charges for x-ray are excluded.
- (3)Please contact Hearing and Speech Centre staff for further enquires. Enquiries : 2200-3245

備註:

- (1)\*吞嚥檢查/吞嚥治療不包括當中的食物收費。
- (2)#吞嚥x光檢查只包括言語治療評估費用，但不包括x-光費用。
- (3)如有查詢請向聽覺及言語治療中心職員聯絡。查詢: 2200-3245



| <b>Haemodialysis Unit</b><br><b>血液透析中心</b> |            |  |   |   |   |
|--|------------|--|---|---|---|
| <u>Particulars</u>                         | 項目         | <u>Standard Wards</u><br><u>(In-patient / Out-patient)</u><br>標準房收費<br>(住院/門診) | <u>Semi-Private Room</u><br><u>In-patient</u><br>半私家房收費 | <u>Private Room</u><br><u>In-patient</u><br>私家房收費 | <u>Subsidized Wards</u><br><u>(Out-patient)</u><br>資助病房收費<br>(門診) |
| Haemodialysis (5 hours)                    | 血液透析 (5小時) | \$2,620  | \$3,700   | \$4,030   | \$1,850   |
| Haemodialysis (6 hours)                    | 血液透析 (6小時) | \$2,850  | \$4,020   | \$4,390   | \$2,010   |

Remarks:

(1)The above table only shows the charges of common chargeable items of Haemodialysis Unit. All information should be used for reference only.

The above prices are exclusive of any dialysers, doctor(s) fee, laboratory and medicines.

(2)Please contact Accounts Department staff for further enquires. Enquiries : 2200-3101

備註:

(1)以上價目表僅列出血液透析中心的基本收費，以供參考。以上費用並不包括人工透析器、醫生費、化驗費及藥物費用等等。

(2)如有查詢請向會計部職員聯絡。查詢: 2200-3101



| <b>Blood Transfusion</b><br><b>輸血</b>        |          |   |   |   |  |                            |
|--|----------|---|---|---|--|----------------------------|
| <u>Particulars</u>                           | 項目       | <u>Standard Wards</u><br><u>In-patient</u><br>標準房收費 | <u>Semi-Private Room</u><br><u>In-patient</u><br>半私家房收費 | <u>Private Room</u><br><u>In-patient</u><br>私家房收費 | <u>Subsidized wards</u><br><u>In-patient</u><br>資助病房收費 | <u>Out-patient</u><br>門診收費 |
| Platelet concentrate (Single / HLA matching) | 成份採血血小板  | \$750   | \$1,050   | \$1,165   | \$525  | \$750                      |
| Platelet concentrate                         | 全血濃縮血小板  | \$140   | \$200   | \$220   | \$100  | \$140                      |
| Cross-Matching Packed Cells                  | 紅血細胞交叉配血 | \$570   | \$800   | \$885   | \$400  | \$570                      |
| Cryoprecipitate                              | 冷凍沉澱物    | \$165   | \$230   | \$260   | \$115  | \$165                      |
| Fresh Frozen Plasma                          | 新鮮急凍血漿   | \$175   | \$250   | \$275   | \$125  | \$175                      |
| Type (Group) & Screen                        | 血型與抗體篩檢  | \$1,350   | \$1,890   | \$2,095   | \$945  | \$1,350                    |

Remarks:

- (1)The above table only shows the charges of common chargeable items of Blood Transfusion. All information should be used for reference only.
- (2)Blood and blood products are supplied by Hong Kong Red Cross free of charge. The Hospital does not charge patient for such products.
- (3)Please contact Clinical Laboratory staff for further enquires. Enquires : 2200-3110

備註:

- (1)以上價目表僅列出常用的輸血項目之收費，以供參考。
- (2)血液及血液製品由香港紅十字會免費提供，本院不另收費。
- (3)如有查詢請向臨床病理檢驗部(化驗室)職員聯絡。查詢：2200-3110



ST. TERESA'S HOSPITAL  
聖德肋撒醫院

| Integrated Diabetes Counseling Services<br>糖尿病綜合護理服務 |                   |   |  |  |  |
|--|-------------------|---|--|--|--|
| <u>Particulars</u>                                   | 項目                | <u>Standard Wards</u><br>(In-patient / Out-patient)<br>標準房收費<br>(住院/門診) | <u>Semi-Private Room</u><br>In-patient<br>半私家房收費 | <u>Private Room</u><br>In-patient<br>私家房收費 | <u>Subsidized Wards</u><br>(Out-patient)<br>資助病房收費<br>(門診) |
| Integrated Diabetes Counseling Services (Basic)      | 糖尿病綜合護理服務<br>(基本) | \$630   | \$880  | \$980                                      | \$440  |

Remarks:

(1) All information in the above table should be used for reference only.

(2) Please contact our staff for further enquires. Enquiries : 2200-3105

備註:

(1) 以上價目表的收費僅供參考。

(2) 如有查詢請向職員聯絡。查詢: 2200-3105



## 服務與收費

### 中醫全科門診

診金一百五十元

### 中藥材配劑 \*

每劑七十元

### 中藥顆粒配劑 \*

每劑七十五元

(顆粒處方總配劑量超過  
30 克，每克需要加收\$2)

### 針灸治療

每次二百八十元

### 骨傷科敷藥

每次二百八十元

### 骨傷科（連針灸）

每次三百八十元

### 代客煎藥

每劑二十元（兩劑起）

\* 不包括特殊用藥    *Special herbal medicine and special Chinese medicine granules are excluded.*

## Services & Charges

### Consultation Fee

\$150 per visit

### Chinese Herbal Medicine \*

\$70 per pack

### Chinese Medicine Granules \*

\$75 per pack

(For granules with a total prescription dose of more  
than 30g, an extra fee of \$2/g is charged)

### Acupuncture

\$280 per visit

### Herbal paste

\$280 per visit

### Bone Setting (acupuncture included)

\$380 per visit

### Herbal Medicine Brewing Service

\$20 per pack (2 packs or above)



# ST. TERESA'S HOSPITAL 聖德肋撒醫院

## FEE SCHEDULE OF CHARGES FOR MEDICAL REPORTS / MEDICAL RECORDS 申請醫療報告 / 醫療記錄之收費詳情

| Item 項目                                    |                                     | Charge 收費  |                        |
|--|-------------------------------------|--|------------------------|
| Medical Report<br>醫療報告                     | Per Request<br>每份                   | \$250 +  | Doctor's Fee*<br>醫生收費* |
| Copies of Inpatient Record<br>住院記錄影印本      | Per Attendance<br>每次住院              | \$310  |                        |
|  |                                     | - Included 30 pages, additional \$2 per page for the 31 <sup>st</sup> page onwards<br>- 包括 30 張紙，其後每張\$2   |                        |
|  |                                     | - Discharge Date over 2 years need to pay additional fee<br><b>\$200</b><br>- 出院日期超過 2 年的記錄要另加 <b>\$200</b><br>- Only provide the record within 7 years<br>- 只能提供 7 年內之記錄    |                        |
|  |                                     |  |                        |
| Copies of Examination Report(s)<br>檢查報告影印本 | Per Attendance<br>每次住院              | \$310  |                        |
| Inpatient Insurance Claim Form<br>住院保險索償表  | Per Attendance<br>每次住院              | Within THREE months after discharge<br>出院後三個月內   |                        |
|  |                                     | Free<br>免費 +   | Doctor's Fee*<br>醫生收費* |
|  |                                     | THREE months after discharge<br>出院其後三個月  |                        |
|  |                                     | \$250 +  | Doctor's Fee*<br>醫生收費* |
| Outpatient Insurance Claim Form<br>門診保險索償表 | Per Request<br>每份                   | \$300  |                        |
| Copies of Outpatient Record<br>門診記錄影印本     | Per Request<br>每份                   | \$280  |                        |
|  |                                     | - Included 15 pages, additional \$2 per page for the 16 <sup>th</sup> page onwards.<br>- 包括 15 張紙，其後每張\$2。   |                        |
|  |                                     | - Consultation Date over 2 years need to pay additional fee<br><b>\$200</b><br>- 診症日期超過 2 年的記錄要另加 <b>\$200</b><br>- Only provide the record within 7 years<br>- 只能提供 7 年內之記錄 |                        |
|  |                                     |  |                        |
| EEG, X-Ray films etc<br>腦電圖、X 光片等等         | Per sheet / per modality<br>每張或每種形式 | \$200  |                        |
| Other Information Enquiries<br>其他申請事項      | Per Request<br>每份                   | Please contact Medical Record Office   |                        |

### Remarks 備註

- The \*Doctor's Fee may be varied, please contact Medical Record Office.  
\*個別醫生收費各異，查詢請聯絡醫療記錄室。
- We regret that we would not handle the insurance claim form and medical report for patients under the care of our Visiting Doctor(s). Please contact the attending Visiting Doctor(s) directly.  
本院不會處理非駐院醫生的住院賠償表及醫療報告，請自行聯絡有關醫生。
- All photocopies are SINGLE SIDE PRINTED in Black & White on a size A4 paper.  
影印副本以單面黑白 A4 紙計算。
- Application will only be processed after the payment. No refund will be made if the request is cancelled.  
申請會在收到所需費用後處理。如果取消申請，已繳費用將不會發回。

For Enquiry 查詢 (Medical Record Office 醫療記錄室)

Tel 電話：2200 3179 Fax 傳真：2200 3199

E-mail 電郵：recordoffice@sth.org.hk

WhatsApp: 9856 2033

Effective Date 生效日期：2025 年 7 月 1 日