



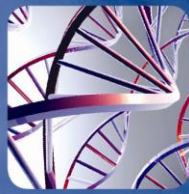
Mater Pathology Price List-Tests Not Covered by Medicare

The following tests are not eligible for Medicare benefit and all costs are the responsibility of the patient.

Test	Price
16SPCR	\$130
Acylcarnitine Profile	\$154
ADSL Mutation	\$1,400
Alpha Thalassemia Gene Testing	\$100
Anti-Mullerian Hormone (AMH)	\$85
ApoCIII isoforms	\$150
Aquaporin 2 gene analysis	\$300
AVP gene analysis	\$300
AVPR2 gene analysis	\$300
Bcl1/IgH Transcript	\$299
Bile Acids, fluid	\$39
Calprotectin - faeces	\$75
Carotene	\$30
Chromogranin A	\$48
Congenital Adrenal Hyperplasia (CAH) gene analysis	\$900
Disorders of Sex Development Panel* (CBX2, DHH, DMRT1, NR5A1 (SF1), SOX9, WT1, AMH, AMHR2, AR, ARX, CYP11A1, CYP17A1, DHCR7, HSD17B3, HSD3B2, LHCGR, MAMLD1, POR, SRD5A2, STAR, TSPYL1, RSPO1, SOX9, WNT4, CYP11B1, CYP19A1, HSD11B1, LHCGR, NR3C1, POR)	\$1,100
Fatty Acid Profile	\$200
Familial Hyperinsulinism (FHI) Panel* (ABCC8, GCK, GLUD1, HADH, HNF4A, KCNJ11, SLC16A1, UCP2)	\$1,100
FISH – Bone Marrow (BMFISH)	\$300
FISH – Paraffin Embedded Tissue (PETFISH)	\$400
FISH – Prenatal 5 probe panel (PNFISH)	\$255
FOXP1 gene analysis	\$220
Gaucher Mutation Analysis	\$368
Gene Mapping Beta	\$275
Gestational DNA Test	\$400
Glucose Tetrasaccharide Analysis	\$119
Glycine Antibodies	\$110
Glycolate - 24hr Urine	\$110

Test	Price
HE4 (ROMA score)	\$50
Helicobacter Urease Biopsy Test	\$15
Hepatitis B Genotype	\$237.44
HMG CoA Antibodies	\$34.55
HPRT1 gene analysis	\$750
IGFBP3	\$55
IgH Gene Rearrange	\$299
IgH/BCL2 Transcript	\$299
Inhibin	\$50
Legionella Urine Antigen	\$29
Lipoprotein A	\$40
Maternal Cell Contamination	\$400
MC2R gene analysis	\$550
MC4R gene Analysis	\$550
MECP2 gene analysis	\$350
Methylmalonic acid - urine	\$85
Maturity Onset Diabetes of the Young (MODY) Panel* (HNF4A, GCK, HNF1A, PDX1, HNF1B, NEUROD1, PAX4, INS, ABCC8, KCNJ11)	\$1,100
MuSK Antibody	\$70
MRAP gene analysis	\$550
MS-MLPA for Prader-Willi/Angelman Syndromes	\$232.50
MTHFR Gene Analysis	\$65
Mucopolysaccharide electrophoresis	\$50
NIPT	\$449
NR5A1 gene analysis	\$550
Organic Acids – amniotic fluid or urine	\$85
Orotic Acid Urine	\$85
OTC Mutation Studies	\$975
pH – Fluid or Urine	\$17
Placental Growth Factor	\$40
Plasminogen	\$115
Plasminogen Activation Inhibitor	\$85
Permanent Neonatal Diabetes (PND) Panel* (ABCC8, EIF2AK3, GCK, HNF1A, HNF1B, HNF4A, INS, KCNJ11, NEUROD1, PDX1)	\$1,100
Prostate Health Index	\$98

***Contact laboratory for Individual Gene pricing**



Mater Pathology Price List-Tests Not Covered by Medicare-Continued

Test	Price
PTH-Related Peptide	\$110
Purines - urine	\$70
RASopathy Syndromes Panel* (BRAF, CBL, HRAS, KAT6B, KRAS, MAP2K1, MAP2K2, NF1, NRAS, PTPN11, RAF1, RIT1, SHOC2, SOS1, SPRED1)	\$1,100
Reverse T3	\$72
SCN1A Gene Analysis	\$1,750
SHOX gene analysis	\$400
Snake Bite venom detection	\$280
Sulphates -urine or plasma	\$30
T-cell Gene Rearrangement	\$299
Tau (asialo, beta2) transferrin	\$200
Thawed vial	\$219
UBE3A3 gene analysis	\$800
Urine dipstick, Chem	\$16
Very Long Chain Fatty Acids	\$85
Xanthochromia - CSF	\$75

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Mater Pathology Price List-Tests with Specific Medicare Requirements

The following tests are eligible for Medicare benefit only when specific criteria are met or if frequency limits are not exceeded. The costs of tests that do not meet these requirements are the responsibility of the patient.

Test	Price
Activated Protein C Resistance	\$25
Antithrombin III	\$25
Factor V Leiden Gene Mutation	\$60
Folate	\$25
Haemoglobin A1c	\$17
HFE Genotyping	\$37
HoloTranscobalamin (If Vit B12 not Medicare Eligible)	\$25
Lupus Anticoagulant	\$25
NT-proBNP	\$59
Protein C	\$25
Protein S	\$25
Prothrombin Gene Mutation	\$60
Thrombotic Profile	\$85
Vitamin B12	\$25
Vitamin D [25 Hydroxy]	\$30