



Email: Ultimumdiagnostics@gmail.com
Tel: 0902606667

ULTIMUM SPECIALIST HOSPITAL LTD. HOSPITAL PRICE LIST

REGISTRATION

S/N	Name of Services	Price (₦)
1.	Folder (Individual)	4,000
2.	Folder (Family)	10,000
3.	General Consultation	5,000
4.	Specialist Consultation	15,000
5.	Amenity Consultation	20,000
6.	Emergency Services	10,000
7.	Premarital Screening	9,800
8.	General Check up	45,200
9.	ECG	6,000
10.	ECHO	15,000
	ACCOMODATION	
11.	General Ward	10,000
12.	Amenity	30,000
13.	Admission Deposit (General Ward)	50,000
14.	Admission Deposit (Amenity)	100,000

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OTHER SERVICES

S/N	Name of Services	Price (₦)
1.	Antenatal Care	100,000
2.	Labour	50,000
3.	Episiotomy Repair	30,000
4.	Instrumental Delivery (Forceps)	70,000
5.	CS & other major surgery	300,000
6.	Intermediate surgery	200,000
7.	Minor surgery	150,000
8.	MVA	20,000
9.	Cervical Cerlage	100,000

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RADIOLOGY

ULTRASOUND SCAN

S/N	TEST DESCRIPTION	PRICE
	Ultrasound scan	
1.	Abdominal USS	4,000
2.	Obstetrics USS	4,000
3.	Pelvic USS	4,000
4.	Doppler USS-Both Limbs	10,000
5.	One Limb	6,000
6.	Thyroid USS	10,000
7.	Testicular USS	10,000
8.	Breast USS	10,000
9.	B-Scan (Both Orbit)	12,000
10.	Transcranial USS	12,000
11.	Superficial Structures	10,000
12.	Anomaly Obstetrics USS including Biophysical Profile	15,000
13.	Penile USS	15,000
14.	Doppler USS both Upper and Lower Limbs	20,000
15.	FAST (Fast Abdominal Scan for Trauma)	15,000
16.	Superficial Swelling	10,000
17.	Chest USS	10,000
18.	Sono HSG	35,000
19.	Carotid Doppler USS	15,000
20.	Ovarian Volume	10,000
21.	Salivary Glands USS	10,000

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X-RAY

S/N	Name of Services	Price (₦)
1.	Abdomen: Erect & Supine X-ray (Adult)	11,000
2.	Abdominal X-ray	8,500
3.	Abdominal X-Ray (KUB) (Adult)	8,500
4.	Abdominal X-ray (KUB) (Paediatrics)	8,000
5.	Additional Views e.g. Spot Compression	8,000
6.	Barium Enema (ADULT)	25,000
7.	Barium Enema (PAEDIATRICS)	20,000
8.	Barium Meal and Follow-Through (ADULT)	25,000
9.	Barium Meal and Follow-Through (PAEDIATRICS)	20,000
10.	Barium Swallow (ADULT)	19,400
11.	Barium Swallow (PAEDIATRICS)	15,000
12.	Both Ankle X-ray (Adult)	10,000
13.	Both Ankle X-ray (Paediatrics)	9,000
14.	Both Hands X-Ray (Adult)	10,000
15.	Both Hands X-Ray (Paediatrics)	9,000
16.	Both Knees X-ray (Adult)	10,000
17.	Both Knees X-ray (Paediatrics)	9,000
18.	Both Leg X-ray (Adult)	11,000
19.	Both Leg X-ray (Paediatrics)	10,000

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20.	Both Pelvic and Hip X-ray (Adult)	11,000
21.	Both Pelvic and Hip X-ray (Paediatrics)	10,000
22.	Both Wrist X-Ray	10,000
23.	Cervical Spine X-Ray	8,500
24.	Cervical X-ray (Adult)	8,500
25.	Cervical X-ray (Paediatrics)	8,000
26.	Chest X-Ray (Adult)	8,000
27.	Chest X-Ray (Paediatrics)	7,500
28.	Chest: AP Lateral	8,000
29.	Chest: Apical X-ray (Adult)	8,000
30.	Chest: Apical X-ray (Paediatrics)	7,500
31.	Chest: Lateral X-ray (Adult)	8,000
32.	Chest: Lateral X-ray (Paediatrics)	7,500
33.	Chest: Lordotic X-ray (Adult)	8,000
34.	Chest: Lordotic X-ray (Paediatrics)	7,500
35.	Chest: PA X-ray (Adult)	8,000
36.	Chest: PA X-ray (Paediatrics)	7,500
37.	Chest: PA + Lateral X-ray (Adult)	11,000
38.	Chest: Semi-recumbent X-ray (Adult)	8,000
39.	Chest: Semi-recumbent X-ray (Paediatrics)	7,500
40.	Chest: Supine X-ray (Adult)	8,000
41.	Chest: Supine X-ray (Paediatrics)	7,500
42.	Clavicles X-ray (Adult)	8,000
43.	Clavicles X-ray (Paediatrics)	7,500

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44.	Coccyx X-ray (Adult)	8,500
45.	Coccyx X-ray (Paediatrics)	8,000
46.	Cystography (Adult)	80,000
47.	Cystography (Paediatrics)	80,000
48.	Diagnostic Angio (Minimum) Adult	25,000
49.	Distal Colostogram	20,000
50.	Elbow X-ray (Adult)	8,000
51.	Elbow X-ray (Paediatrics)	7,500
52.	Facial Bone X-Ray (Adult)	9,000
53.	Facial Bone X-Ray (Paediatrics)	5,000
54.	Femur X-ray (Adult)	8,000
55.	Femur X-ray (Paediatrics)	8,000
56.	Femur/Thigh X-ray	8,000
57.	Finger X-ray (Adult)	8,000
58.	Finger X-ray (Paediatrics)	7,500
59.	Fistulography (Adult)	20,000
60.	Fistulography (Paediatrics)	15,000
61.	Forearm X-ray (LP)	8,000
62.	Forearm X-ray (Adult)	8,000
63.	Forearm X-ray (Paediatrics)	7,500
64.	Hand X-ray (Adult)	8,000
65.	Hand X-ray (Paediatrics)	7,500
66.	Hip AP + Lateral X-Ray	9,000

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67.	Hip AP X-ray (Adult)	8,000
68.	Hip AP X-ray (Paediatrics)	7,500
69.	Humerus X-ray (Adult)	8,000
70.	Humerus X-ray (Paediatrics)	7,500
71.	Hysterosalpingography (HSG)	25,000
72.	Intravenous Urography (IVU) (Adult)	30,000
73.	Intravenous Urography (IVU) (Paediatrics)	23,000
74.	Invertogram	8,000
75.	Knee X-ray (Adult)	8,000
76.	Left Foot X-ray (Paediatrics)	7,500
77.	Left Hand X-ray (Adult)	8,000
78.	Left Hand X-ray (Paediatrics)	7,500
79.	Left Knee X-ray (Adult)	8,000
80.	Left Leg X-ray (Adult)	8,000
81.	Left Leg X-ray (Paediatrics)	7,500
82.	Left Shoulder X-ray	9,000
83.	Leg X-ray (Adult) (Both)	11,000
84.	Leg X-ray (Paediatrics) (Both)	10,000
85.	Limited Enema (Adult)	20,000
86.	Limited Enema (Paediatrics)	20,000
87.	Lumbosacral X-ray (Adult)	9,000
88.	Lumbosacral X-ray (Paediatrics)	8,000
89.	Mandible X-ray (Adult)	9,500

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90.	Mandible X-ray (Paediatrics)	8,500
91.	Mastoids X-ray (Adult)	9,500
92.	Mastoids X-ray (Paediatrics)	8,500
93.	MCU (Adult)	25,000
94.	MCU (Paediatrics)	20,000
95.	Pelvis AP X-Ray (Adult)	8,000
96.	Pelvis AP X-Ray (Paediatrics)	7,500
97.	Plain Abdomen	8,000
98.	Post Nasal Space (PNS) X-ray (Adult)	8,000
99.	Post Nasal Space (PNS) X-ray (Paediatrics)	7,500
100.	Right Ankle X-ray (Adult)	8,000
101.	Right Ankle X-ray (Paediatrics)	7,500
102.	Right Foot X-ray (Adult)	8,000
103.	Right Foot X-ray (Paediatrics)	7,500
104.	Right Hand X-ray (Adult)	8,000
105.	Right Hand X-ray (Paediatrics)	7,500
106.	Right Leg X-ray (Adult)	8,000
107.	Right Leg X-ray (Paediatrics)	7,500
108.	Right Shoulder X-ray	9,000
109.	RUG, MCU (Adult)	25,000
110.	RUG, MCU (Paediatrics)	20,000
111.	Sacroiliac Joint X-ray (Adult)	9,500
112.	Sacroiliac Joint X-ray (Paediatrics)	8,500

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113.	Sacrum X-ray (Adult)	9,500
114.	Sacrum X-ray (Paediatrics)	8,000
115.	Shoulder X-ray (Adult)	9,000
116.	Shoulder X-ray (Paediatrics)	8,000
117.	Shoulder X-ray (Paediatrics)	8,000
118.	Sialography (Adult)	25,000
119.	Sialography (Paediatrics)	20,000
120.	Sinuses X-ray (Adult)	9,500
121.	Sinuses X-ray (Paediatrics)	8,500
122.	Skull X-ray (Adult)	9,000
123.	Skull X-ray (Paediatrics)	8,000
124.	Soft tissue neck & Thoracic inlet X-ray (Adult)	11,000
125.	Soft tissue neck & Thoracic inlet X-ray (Paediatrics)	10,000
126.	Soft Tissue Neck (Adult)	9,000
127.	Soft Tissue Neck (Paediatrics)	8,000
128.	Soft Tissue Neck X-ray (Adult)	9,000
129.	Soft Tissue Neck X-ray (Paediatrics)	8,000
130.	Theatre C-Arm (Adult)	20,000
131.	Theatre C-Arm (Paediatrics)	15,000
132.	Thigh X-ray (Adult)	9,000
133.	Thigh X-ray (Paediatrics)	8,000
134.	Thoracic X-ray (Adult)	8,500
135.	Thoracic X-ray (Paediatrics)	8,000
136.	Thoraco Lumbar X-ray (Adult)	12,000

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137.	Toes X-ray (Adult)	8,000
138.	Toes X-ray (Paediatrics)	7,500
139.	Venography (Adult)	30,000
140.	Venography (Paediatrics)	20,000
141.	Wrist X-ray (Adult)	8,000
142.	Wrist X-ray (Paediatrics)	7,500
143.	X-ray of All Body Regions (Adult)	105,000
144.	X-ray of All Body Regions (Paediatrics)	55,000

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CHEMICAL PATHOLOGY

S/N	TEST DESCRIPTION	PRICE
	Renal function test (E/U/C)	5,400
1.	Sodium	700
2.	Potassium	700
3.	Chloride	700
4.	Bicarbonate	700
5.	Urea	1,200
6.	Creatinine	1,200
7.	Total calcium	1,500
8.	Inorganic phosphate	1,500
9.	Uric acid	1,500
10.	Magnesium	2,000
	LIVER FUNCTION TEST	9,800
11.	Total bilirubin	800
12.	Direct bilirubin	800
13.	Conjugated bilirubin	800
14.	Alkaline phosphates	1,000
15.	ALT (Alanine Aminotransferase SGPT)	1,000
16.	AST (Aspartate Aminotransferase SGOT)	1,000
17.	Total protein	1,000
18.	Albumin	1,000
19.	Gamma GTT	1,000
20.	LDH	2,200

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	LIPID PROFILE	6,000
21.	Total cholesterol	1,500
22.	Triglyceride	1,500
23.	HDL	1,500
24.	LDL	1,500
	DIABETES SCREENING	
25.	Fasting blood sugar (FBS)	1,200
26.	Random Blood Sugar (RBS)	1,200
27.	2 Hours post prandial blood sugar	2,400
28.	Oral Glucose tolerance test (OGTT) 100g	5,000
29.	Oral Glucose tolerance test (OGTT) 50g	2,700
30.	Oral Glucose tolerance test (OGTT) 75g	8,000
31.	Glycosylated Hemoglobin	9,000
	RHEUMATOLOGY	
32.	ANA	20,000
33.	Anti Ds DNA	23,000
34.	Anti Centromer	23,000
35.	Anti Smith	23,000
36.	ACCP	25,000
37.	Rheumatoid Factor	7,000
	OTHERS	
38.	Pregnancy test serum	2,000
39.	Pregnancy test urine	2,000
40.	PT serial dilution	3,500
41.	Urinalysis	1,000
42.	Ferritin	10,000
43.	Faecal occult blood test	1,000
44.	24hr Urine protein	3,000
45.	24hr Urine Sodium	2,000
46.	24hr Urine Potassium	2,000
47.	Creatinine clearance	3,000
48.	Bence jones protein	3,000
49.	Serum Amylase	6,000
50.	CRP	9,000

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	HORMONAL PROFILE	
51.	Follicle stimulate hormone FSH	9,000
52.	Luteinizing Hormone LH	9,000
53.	Prolactin	9,000
54.	Progesterone	9,000
55.	Testosterone	9,000
56.	Estradiol	9,000
57.	AMH	15,000
58.	Vitamin D	15,000
59.	Cortisol	10,000
	THYROID	
60.	Thyroid Stimulating Hormones TSH	9,000
61.	Total T3	9,000
62.	Total T4	9,000
63.	Free T3	9,000
64.	Free T4	9,000
	THYROID ANTIBODIES	
65.	Anti TPO (Thyroid peroxidase antibody)	18,000
66.	TRAB (Thyroid Stimulating Hormone Receptor Antibody)	18,000
67.	Anti Tg (Thyroglobulin Antibody)	18,000



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	CARDIOLOGY	
68.	BNP	18,000
69.	D-Dimer	10,000
	CARDIAC MARKERS	
70.	CK-MB	10,000
71.	Troponin I	10,000
72.	Myoglobin	10,000
	TUMOUR MARKERS	
73.	PSA (Prostate specific Antigen)	10,000
74.	CA 125	18,000
75.	CA 15-3	18,000
76.	CA 19-9	18,000
77.	CEA (Carcinoembryonic Antigen)	10,000
78.	B-HCG both Urine and Blood	15,000
79.	AMH	15,000

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HAEMATOLOGY

S/N	TEST DESCRIPTION	PRICE
1.	ABO & Rh blood grouping	2,000
2.	Full Blood Count FBC	3,000
3.	CBC Automation	5,000
4.	Haemoglobin (Hb)	2,000
5.	Packed cell volume PCV	1,500
6.	Mean cell Volume (MCV)	2,000
7.	Mean cell Haemoglobin (MCH)	2,000
8.	Reticulocytes count	2,500
9.	Platelets counts	2,500
10.	Erythrocyte sedimentation rate (ESR)	2,000
11.	Bleeding time	1,000
12.	Clotting time	2,000
13.	Prothrombine time(PT)	3,500
14.	Partial thromboplastine time PTTK/APTT	3,500
15.	International Normalize ratio (INR)	3,500
16.	Hbgenotype (Haemoglobin Electrophoresis)	1,800
17.	White cell Absolute count	2,000
18.	Le cell	3,000

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MICROBIOLOGY/PARASITOLOGY

S/N	TEST DESCRIPTION	PRICE
1.	Urine M/C/S	4,000
2.	Stool M/C/S	4,000
3.	Blood culture	5,000
4.	Malaria parasite MP	2,000
5.	Sputum M/C/S	4,000
6.	Seminal fluids Analysis	8,000
7.	CSF, Pleural, Ascetic, Synonal Fluid M/C/S	4,000
8.	SWAB M/C/S (pus, wound, throat, eye, ear, urethral aspirates, HVS, ECS)	4,000
9.	Skin snip microfilaria	1,500
10.	Skin scarping for mycology	3,500
11.	Monteur test	2,000
12.	Malaria (Rapid Antigen Screening Test)	2,000
13.	Malaria (Thick Blood Smear)	2,000

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HISTOPATHOLOGY

S/N	TEST DESCRIPTION	PRICE
1.	Fine Needle Aspiration	8,000
2.	Tissue Biopsy	10,000
3.	Lymph Biopsy	10,000
4.	Pap Smear	10,000

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SEROLOGICAL TEST

S/N	TEST DESCRIPTION	PRICE
1.	Widal test	1,500
2.	VDRL	1,500
3.	Hepatitis B Surface Antigen (HBsAg)	2,500
4.	Hepatitis B Panel (HbsAg, HbsAb, HbeAg, HbeAb, HbcAb)	7,000
5.	HIV Screening	2,000
6.	Hepatitis C Virus Antigen	2,000
7.	Helicobacter pylori Antigen	2,500
8.	Rheumatoid Factor	7,000
9.	CRP	9,000

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PREMARITAL SCREENING

S/N	TEST DESCRIPTION	PRICE
	Premarital Screening	13,000
1.	Blood Grouping	2,000
2.	Hb Genotype	2,000
3.	HIV	2,000
4.	Hepatitis B surface Ag	2,500
5.	Hepatitis C virus Ag	2,000
6.	VDRL	1,500
7.	Urinalysis	1,000

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GENERAL CHECK UP

S/N	TEST DESCRIPTION	PRICE
	General Check up	45,200
1.	Fasting blood sugar	1,200
2.	Fasting lipid profile	6,000
3.	Liver function test	9,800
4.	EUC	5,400
5.	Calcium	1,500
6.	Magnesium	2,000
7.	Inorganic Phosphate	1,500
8.	Uric acid	1,500
9.	CBC	5,000
10.	Blood group	2,000
11.	Genotype	2,000
12.	HIV	2,000
13.	Hepatitis B surface Ag	2,500
14.	Hepatitis C virus Ag	2,000
15.	Urinalysis	1,000

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ULTIMUM SMILE DENTAL CARE.

PRICE LIST

DENTAL PROCEDURES

S/No	PROCEDURE	PRICE
1	Scaling and polishing	10,000
2	Teeth bleaching and whitening	60,000
3	Simple tooth filling (GIC Restoration)	15,000
4	Cosmetic tooth filling (Composite).	15,000
5	Simple tooth extraction	10,000
6	Surgical tooth extraction	40,000
7	Acrylic tooth crown	20,000
8	Porcelain tooth crown	50,000
9	Porcelain veneer crown	50,000
10	Simple Artificial teeth (denture) 1 st unit	20,000
11	Denture subsequent units	10,000
12	RCT Front teeth	25,000
13	RCT posterior teeth	40,000
14	Periapical X-ray	3000
15	Flexible denture 1 st Unit	30,000
16	Flexible denture subsequent unit	15,000
17	Desensitization (each tooth)	5,000.
18	Composite & wire splinting	40,000
19	Home Service (minus procedure)	50,000.
20	Apicectomy and RCT	60,000
21	Fluoride therapy	10,000
22	Intermaxillary fixation	70,000
23	Excisional biopsy	30,000
24	Pulpotomy	30,000
25	Pulpectomy	40,000

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ULTIMUM AESTHETIC CLINIC

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S/N	DESCRIPTION	PRICE
	SKIN SCANNING	
1.	Skin scanning analysis	5,000
2.	Skin scanning analysis & consultation	10,000
	CHEMICAL PEEL	
3.	Mild per session	30,000
4.	Moderate per session	35,000
5.	Deep per session	35,000
	IV COCKTAIL INFUSION	
6.	Glass skin infusion	35,000
7.	Multivitamin cocktail	35,000
8.	Collagen infusion	45,000
9.	Weight loss drip	35,000
	BODY TREATMENT	
10.	Skin tag removal	15,000
11.	Stretch mark removal	20,000 & above
12.	Knuckles removal	8,000
13.	Knee cleansing	8,000
14.	Eczema treatment	5,000
15.	Cellulite body treatment	15,000
16.	Scar removal	30,000
17.	Cupping therapy	30,000
18.	Hyperpigmentation	30,000 & above
	INJECTABLE SERVICES	
19.	PRP Face rejuvenation	30,000
20.	PRP Hair loss	30,000
21.	PRP Stretch mark	35,000 & above
22.	PRP Body enhancement	40,000 & above

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ULTIMUM AESTHETIC CLINIC.

PRICE LICE

S/N	DESCRIPTION	PRICE
	WEIGHT LOSS THERAPY	
	BODY REDUCTION (ULTRASONIC CAVITATION)	
1.	Back Fat Reduction	20,000
2.	Arm Reduction	15,000
3.	Waist Reduction	15,000
4.	Thighs Reduction	15,000
	TUMMY REDUCTION	
5.	Wood Therapy	10,000
6.	Ultrasonic Cavitation	20,000
7.	Lipo Injection	40,000 per ampoule
8.	Ultrasonic Cavitation & Lipo Injection	60,000 per ampoule
9.	Cryolipolysis	35,000
10.	Ultrasonic Cavitation & Cryolipolysis	55,000
	FAT DISSOLVING THERAPY (LIPO INJECTION)	
11.	Tummy Reduction	40,000
12.	Arm Reduction	25,000
13.	Back Folds Reduction	40,000
14.	Full Body Reduction	250,000

**Address: No.2 Circular Road, By Giwa Road, Barrack Junction, Old GRA,
Maiduguri, Borno State**



Email: Ultimumdiagnostics@gmail.com
Tel: 0902606667

ULTIMUM AESTHETIC CLINIC.

PRICE LICE

S/N	DESCRIPTION	PRICE
	CRYO LIPOLYSIS (Fat Freezing)	
	TUMMY REDUCTION	
1.	One Session	35,000
2.	Three Sessions	100,000
	ARM REDUCTION	
3.	One Session	15,000
4.	Three Sessions	40,000
	UNDER CHIN REDUCTION	
5.	One Session	15,000
6.	Three Sessions	40,000
	SIDE FOLD REDUCTION	
7.	One Session	25,000
8.	Three Sessions	70,000

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PRICE LICE

S/N	DESCRIPTION	PRICE
	FACIALS	
9.	Basic/Classic	8,000
10.	Acne/Deep Cleansing	9,000
11.	Dermaplane	7,000
12.	Collagen Facials with Mask	15,000
13.	Collagen Facials with Powder	10,000
14.	Ayurvedic Facials	8,000
15.	Bibi Glow Facials	15,000
16.	Dermabbrasion Facials	8,000
17.	PRT (Vampire) Facials	20,000
18.	Hydra Facials	20,000
19.	PRP Infusion Facials	30,000
	MASSAGE	
20.	Swedish Massage	9,000
21.	Deep Massage	10,000
22.	Stone Massage	10,000
23.	Wood Therapy	12,000

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