

STD Clinic 610 South 200 East, 2nd Floor

385-468-4242; SaltLakeHealth.org/STD

Payment due at time of visit.

PrEP	Required Visits	Fee
Initial Office Visit		\$245
HIV test		
 Syphilis test 		
 Chlamydia/Gonorrhea te 	ests (oral, urine, rectal)	
Hepatitis C test		
	en and surface antibody	
Basic or Comprehensive	e Metabolic Panel	\$ 50
1-Month Follow-up		\$50
HIV test		
3-Month Follow-up		\$135
HIV test		
 Syphilis test 		
Chlamydia/Gonorrhea te		
Basic or Comprehensive	e Metabolic Panel	
Hepatitis C test (\$50) (required at 2 Month Follo	w up for mon who have say with mon and poorly	who inject drugs)
6-Month Follow-up	w-up for men who have sex with men and people	\$135 \$135
•		φ135
HIV test Syphilip test		
Syphilis testChlamydia/Gonorrhea te	oste (oral urino, roctal)	
 Basic or Comprehensive 		
9-Month Follow-up		\$130
HIV test		••••
Syphilis test		
 Chlamydia/Gonorrhea te 	ests (oral, urine, rectal)	
Comprehensive Metabo	lic Panel (\$15)	
(required at 9-Month Follo	w-up if diabetic, hypertensive, or on certain medi	cations)
12-Month Follow-up		\$140
HIV test		
 Syphilis test 		
 Chlamydia/Gonorrhea te 	ests (oral, urine, rectal)	
Hepatitis C test		
Basic or Comprehensive		
Hepatitis B surface antig		
Hepatitis B surface antik (required at 12 Month Fall	• • •	
(required at 12-Month Foll	ow-up II not Immunizea)	\$005
MINIMUM YEARLY TOTAL	P there will be a \$50 office visit fee plus any required	\$835

For any additional visits related to PrEP, there will be a \$50 office visit fee plus any required testing. **We are unable to bill health insurance.** Prices are subject to change; call clinic to verify.