

Prices starting January 1st,2025

Provincial Health Care Insurance Plans do not cover Travel Health and most School Immunization Services, a receipt with the **Drug Identification Number (DIN)** will be provided to you at the end of each of your visits for submission to your **private** health insurance plan. **Please make sure to submit your receipts**

Clinic Visit Adult – (Post Secondary, Employment) or Travel (Per Adult/Per Trip)		\$48.00
Clinic Visit for Minors under 18 years of age		\$28.00
TRAVEL CONSULT ONLY (no vaccines wanted)		\$65.00 per visit/per person
Short notice Cancellation (less than 24 hours) No show Fee		\$48.00 per appointment/Person
DIN #	VACCINES – SUBJECT TO AVAILABILITY	PRICE
02187078 (Adult)	Hepatitis A (2 dose series)	\$84.00 (per dose)
02231056 (ped)	Hepatitis A pediatric (2 doses)	\$75.00 (per dose)
02487039 (Adult)	Hepatitis B (3 dose series)	\$79.00 (per dose)
02487020 (Ped)		\$72.00 Peds (per dose)
02230578 (Adult)	Hepatitis A & B (3 dose series)	\$110.00/\$80.00 Peds (per dose)
02237548 (Ped)		
02468425	Shingles Vaccine (2 dose series) (No Clinic Visit)	\$192.00 (per dose) + Injection Fee
02544040	Respiratory Syncytial Virus RSV (2-74 yrs of age)	\$315.00
02544040	RSV monoclonal antibodies (0 to 24 months)	\$1040.00
02548984	Chikungunya	\$240.00
02130955	Typhoid (Injection)	\$84.00
00885975	Typhoid (Oral)	\$92.00
02402904	Meningitis (ACY-W135) (No Clinic Visit) Hajj/Umra only	\$115.00 + injection fee
02417030	Meningitis B	\$155.00 (per dose)
02240255	Tetanus Diphtheria & Pertussis – Eligible Provincially Funded	\$13.00 Injection Fee
02247600	Tetanus Diphtheria & Pertussis – Not eligible	\$69.00
01959042	Polio	\$94.00
02352044	Tetanus Diphtheria Pertussis + Polio	\$120.00
00317268	One-Step TB Skin/ Mantoux Test (TB Test + Reading)	\$79.00
00317268	Two-Step TB Skin/Mantoux Test (TB Test + Reading)	\$158.00
02247208	Oral Cholera /Travellers' Diarrhea	\$85 per Dose
02239208	MMR (Measles, Mumps & Rubella)	\$79.00
01908286	Rabies (3 dose series)	\$240.00 (per dose)
02333279	Japanese Encephalitis (2 dose + booster)	\$237.00 (per dose)
02437058	Cervical Cancer HPV (2 dose series) No Clinic Visit	\$205.00 (per dose) + injection Fee
00428833	Yellow Fever Vaccine (International Certificate)	\$217.00
02246081	Varicella (2 dose series)	\$140.00 (per dose)
02527049	Pneumococcal (Pevnar20) No Clinic Visit	\$150.00 + Injection Fee
Yellow Fever Replacement International Certificate		\$50.00
Yellow Fever Contraindication International Certificate (eligible ONLY)		\$60.00
School Immunization Form. At the time of FIRST VISIT ONLY (includes immunization assessment, requisitions and follow-ups) If getting vaccines through another health care provider, we will keep the form and once you have completed vaccines you can submit the records to us for completion.		\$40.00
AFTER FIST VISIT		\$60.00
Serology Requisitions (without school form) for Hep B, C, VZ and HIV		\$15.00
DOCUMENT REPLACEMENT: Requisition and Receipts		\$15.00 each