



The Centre for Bone
and Periodontal Research
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IMAGING & BIOMECHANICS Project Estimate

Date: _____ **Investigator** (for invoicing): _____
Contact person: _____ **E-mail:** _____
Tel.(1) : _____ **Tel.(2):** _____
Sample description: _____

Service		Academic price (per Scan or Sample)	Industry price	Number of samples or scans	Sub total	Date completed
PIXImus densitometry (DEXA)	Whole body	\$25 (incl. 2 ROIs)	\$50			
	Samples	\$25 + \$5/extra ROI	\$50			
Micro-CT	Scan	\$100	\$200			
	Analysis (Standard)	\$80	\$100			
Extra analysis		\$50/Hr	\$100/Hr			
Radiography (X-Ray)	Whole body	\$18	\$30			
	Samples	\$18 + \$2/extra sample	\$30			
Biomechanical testing		\$35	\$45			
TOTAL						

Instructions:

Signature: _____