

SOMERSET HOSPITAL



COMPLETE MULTIPHASIC BLOOD SCREENING...\$35

SOMERSETHOSPITAL

Chemistry

A/G Ratio
Albumin
Alk Phosphatase
ALT (SGPT)
AST (SGOT)
Bilirubin, Direct
Bilirubin, Total
BUN/Creat Ratio
Calcium
Chloride
Cholesterol
CO2

Creatinine
GFR
Glucose
HDL
LDL
Phosphorus
Potassium
Sodium
Total Protein
Triglycerides
Urea Nitrogen
Uric Acid

Complete Blood Count

Differential
Hematocrit
Hemoglobin
RBC
MCH
MCHC
MCV
MPV
RDW
Platelets
WBC

ADDITIONAL TESTING AVAILABLE

PSA: \$20	TSH: \$10	Total T4: \$20
A1C: \$20	Free T4: \$20	Vitamin D: \$35
Rubella, IGG: \$35	Varicella-Zoster, IGG: \$35	Hep B Ab: \$35
Rubeola, IGG: \$35	Mumps, IGG: \$35	Hep C Ab: \$35

A 12 hour fast (NO food or drink except for plain water) is required.

Medication should be taken as prescribed.

You may use this coupon Tuesday through Friday from 8:00 am to 3:00 pm at our Main Hospital lab draw area or any of the off site draw locations listed below:

Berlin Family Practice: Monday and Thursday from 7:30 am to 10:00 am

United Methodist Church in Kantner: Tuesdays from 7:30 am to 10:00 am

Confluence: Wednesdays from 8:00 am to 10:30 am

Note: At offsites, payment will be accepted by check payable to Somerset Hospital or credit card - no cash accepted.

Patient Full Name _____ **Date of Birth** _____

Address _____ **Phone number** _____

Physician name and address _____

TESTS

- | | | |
|--|---|--|
| <input type="checkbox"/> Complete Multiphasic Blood Screening \$35 | | |
| <input type="checkbox"/> PSA: \$20 | <input type="checkbox"/> A1C: \$20 | <input type="checkbox"/> TSH: \$10 |
| <input type="checkbox"/> Free T4: \$20 | <input type="checkbox"/> Total T4: \$20 | <input type="checkbox"/> Vitamin D: \$35 |
| <input type="checkbox"/> Rubella, IGG: \$35 | <input type="checkbox"/> Mumps, IGG: \$35 | <input type="checkbox"/> Hep C Ab: \$35 |
| <input type="checkbox"/> Rubeola, IGG: \$35 | <input type="checkbox"/> Hep B Ab \$35 | <input type="checkbox"/> Varicella-Zoster, IGG: \$35 |

Somerset Hospital's fully licensed and accredited laboratory will conduct sample collection, analyze those samples and maintain confidential records of all results. Your results will be forwarded to the physician listed on this flyer.

Register patients under contract account# CB1121 Somerset Multiphasic Health Screen
