

COMPLETE MULTIPHASIC BLOOD SCREENING...\$40

Chemistry

A/G Ratio	Creatinine
Albumin	GFR
Alk Phosphatase	Glucose
ALT (SGPT)	HDL
AST (SGOT)	LDL
Bilirubin, Direct	Phosphorus
Bilirubin, Total	Potassium
BUN/Creat Ratio	Sodium
Calcium	Total Protein
Chloride	Triglycerides
Cholesterol	Urea Nitrogen
CO2	Uric Acid

Complete Blood Count

Differential
Hematocrit
Hemoglobin
RBC
MCH
MCHC
MCV
MPV
RDW
Platelets
WBC

ADDITIONAL TESTING AVAILABLE

PSA: \$25	Free T4: \$25	Total T4: \$25
A1C: \$25	Varicella-Zoster, IGG: \$35	Vitamin D: \$40
Rubella, IGG: \$35	Mumps, IGG: \$35	Hep B Ab: \$40
Rubeola, IGG: \$35	Sed Rate: \$20	Hep C Ab: \$40
TSH: \$15		

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 Monday through Friday from 6:30 am to 7:00 pm and Saturday 6:30 am to noon at our Main Hospital lab draw area or any of the off site draw locations listed below:

Berlin Family Practice: Monday and Thursday, 7:30 to 10 a.m.

United Methodist Church in Kantner: Tuesday, 7:30 to 10 a.m.

Confluence: Wednesday, 8 to 10:30 a.m.

Note: At offsites, payment will be accepted by check payable to UPMC Somerset 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 \$40 | <input type="checkbox"/> TSH: \$15 |
| <input type="checkbox"/> PSA: \$25 | <input type="checkbox"/> Vitamin D: \$40 |
| <input type="checkbox"/> Free T4: \$25 | <input type="checkbox"/> Hep C Ab: \$40 |
| <input type="checkbox"/> Rubella, IGG: \$35 | <input type="checkbox"/> Varicella-Zoster, IGG: \$35 |
| <input type="checkbox"/> Rubeola, IGG: \$35 | <input type="checkbox"/> Hep B Ab \$40 |
| <input type="checkbox"/> Sed Rate: \$20 | |

UPMC Somerset'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
