



Holy Family Memorial

Sponsored by the Franciscan Sisters of Christian Charity

LABORATORY DIRECT ACCESS TESTING

Name: _____

M F DOB ____/____/____

Telephone #: _____

Collection Date: ____/____/____ Time: _____

Waiver Signed? Yes No

Checked By: _____
(Verify waiver explained, and paperwork correctly filled out)

Results Mailed By (Initials): _____ Date: _____

Additional Comments: _____

Check Panels from Left Column or Individual Tests from Right Column

<input type="checkbox"/>	R	Indicates Reportable to Health Dept.	\$
		Indicates 8-12 hour fast recommended - water or black coffee is okay	
<input checked="" type="checkbox"/>		Lipid Panel: Cholesterol, HDL, LDL Calculated, Triglycerides	\$20
		Basic Metabolic Panel: Sodium, Potassium, Chloride, TCO2, Glucose, Creatinine, BUN, Calcium	\$25
		Liver Function Test: Albumin, Total & Direct Bilirubin, AST, ALT, Alkaline Phosphatase, Total Protein	\$25
		Comprehensive Metabolic Panel Sodium, Potassium, Chloride, TCO2, BUN, Glucose, Creatinine, Calcium, Albumin, Bilirubin, Alk. Phos., Total Protein, AST, ALT	\$45
		Renal Function Panel: (Kidney) Sodium, Potassium, Chloride, TCO2, BUN, Glucose, Creatinine, Calcium, Albumin, Phosphorus	\$30
		DAT Bone Health Panel: Vitamin D, Calcium, Phosphorus, Parathyroid Hormone, Alkaline Phosphatase	\$80
		DAT Heart Health Panel: Comprehensive Metabolic Panel, Lipid Panel, Homocysteine, C-Reactive Protein (High-Sens)	\$100
		CBC with Diff: (Complete Blood Count with Auto Diff) Includes White Cell Count with Differential, Red Cell Count, Hemoglobin, Hematocrit, Platelet count, Indices	\$30
		Urine Drug Screen: Opiates, Benzodiazepines, Cocaine, Marijuana, Amphetamines, Barbituates, Phencyclidine	\$80
	R	DAT STD Panel: Chlamydia, Gonorrhea (PCR), Syphilis (RPR), HIV Requires urine and blood sample	\$110
		DAT Anemia Panel: Complete Blood Count, Ferritin, Vitamin B12, Iron, Iron Binding Capacity and % Saturation, Folic Acid	\$100
	R	Acute Hepatitis Panel: Hep A Ab IgM, Hep B Core Ab IgM, Hep B Surface Antigen, Hep C Antibody	\$110
		Thyroid Panel: Thyroid Stimulating Hormone, Free Thyroxine	\$45
		Celiac Disease Panel: Tissue Transglutaminase Antibody IgA, IgA, Gliadin Antibody IgA	\$80
		Iron Level and TIBC: Total Iron, Iron-Binding-Capacity, % Saturation	\$25
		DAT Immunization Panel: Rubella, Measles, Mumps, Varicella Antibodies	\$70
		DAT Blood Type ABO Blood Type, Rh Factor	\$15
		DAT Draw for a kit Kit & shipping containers/supplies provided by patient. Specimen collection, processing and shipping performed by HFM.	\$30

<input type="checkbox"/>	R	Indicates Reportable to Health Dept.	\$
		Indicates 8-12 hour fast recommended - water or black coffee is okay	
<input checked="" type="checkbox"/>		Alkaline Phosphatase	\$10
		ALT (Alanine Transaminase)	\$10
		AST (Aspartate Transaminase)	\$10
		Bilirubin, Direct	\$10
		Bilirubin, Total	\$10
		BUN (Urea Nitrogen)	\$10
		Calcium Level Total	\$10
		Carbon Monoxide	\$20
	R	Chlamydia, PCR (Urine)	\$30
		Cholesterol Total	\$10
		Creatinine	\$10
		Estradiol Level	\$30
		Ferritin	\$20
		Folate Level	\$25
		Free T3 (Triiodothyronine)	\$25
		Free T4 (Free Thyroxine)	\$25
		GGT	\$10
		Glucose Random or Fasting	\$10
		Hemoglobin A1c	\$20
	R	GC, PCR (Urine) (Gonorrhea)	\$30
		Hgb & Hct (Hemoglobin & Hematocrit)	\$15
		Hepatitis B Surface Antibody	\$35
	R	Hepatitis B Surface Antigen	\$35
	R	Hepatitis A IgM	\$45
	R	Hepatitis C Ab	\$45
		High Sensitive C-Reactive Protein (HSCRP)	\$30
	R	HIV	\$45
		Homocysteine	\$30
		Iron Level (Total only)	\$15
		LDL Direct (Low Density Lipoprotein)	\$35
	R	Lyme Antibody Screen	\$35
		Magnesium Level	\$20
		Measles IgG (Immune Status)	\$20
		Microalbumin, Urine	\$20
		Mononucleosis Screen	\$20
		Mumps Virus Ab IgG (Immune Status)	\$20
		Phosphorus Level	\$10
		Platelet Count	\$10
		Potassium Level	\$10
		Pregnancy test (Qualitative)- Serum or Urine	\$15
		PSA Screening	\$35
		Rheumatoid Factor Quantitative (RF)	\$35
		Sed Rate (ESR / Erythrocyte Sedimentation Rate)	\$20
	R	Syphilis Antibody	\$20
		Rubella Immune Status	\$20
		Sodium Level	\$10
		DAT Strep A Screen	\$20
		Testosterone Free & Total	\$65
		Transferrin	\$30
		Triglycerides	\$10
		TSH (Thyroid Stimulating Hormone)	\$25
		Uric Acid	\$10
		DAT Urinalysis	\$15
		Varicella Zoster Virus Ab IgG Immune Status (chicken pox)	\$25
		Vitamin B-12 Level	\$45
		Vitamin D Level	\$40

TOTAL PAID:

CASHIER:

DATE PAID:

You will be asked to address an envelope with your mailing address. Your results will be mailed to you upon completion.

The Direct Access testing Consent Form is on page 2. Laboratory staff will review it with you and ask for your signature prior to sample collection. Please contact HFM Laboratory with questions at (920) 320-2243.