



Community Wellness—Veterans Memorial Hospital

Patient Name: _____ Birthdate: _____

Select test(s) by using a ballpoint pen, pressing firmly over designated box.

Testing Packages

- Community Wellness Complete Package (Fast for 12 hrs.) \$50**
Includes the following:
- Lipid Panel
Measures cholesterol, LDL, HDL and Triglycerides. This panel provides Cardiac Risk Assessment.
 - Glucose
Measures blood sugar levels. This is a screening test for Diabetes.
 - TSH
Measures thyroid function. This is a screening test for thyroid disorders.
 - Hemoglobin
This is a screening test for anemia.
 - BUN, Creatinine, Sodium, Potassium, Calcium, Uric Acid and AST:
These are general screening tests that provide an overall picture of your body's chemical balance and metabolism.

- Community Wellness Partial Package (Fast for 12 hrs.) \$45**
Includes only the top three tests listed above: Lipid Panel, Glucose and TSH.

Individual Tests

- Hemogram & Potassium \$25**
Measures anemia, infection and chemical balance.
- Lipid Panel \$30**
Measures cholesterol, LDL, HDL and triglycerides. (Fast 12 hrs.)
- Glucose \$15**
Measures blood sugar levels. This is a screening test for Diabetes. (Fast 12 hrs.)
- HgbA1c \$35**
Measures how well diabetes is being controlled.
- Vitamin D \$65**
Measures amount of Vitamin D in the system testing for a deficiency.
- PSA \$40**
Measures Prostatic Specific Antigen. This is a screening test for Prostate Cancer in men.
- Hemogram \$20**
Measures white blood cell count, red blood cell count, hemoglobin, hematocrit and platelets. This is a screening test for anemia or an infection.
- TSH \$20**
Measures thyroid function. This is a screening test for thyroid disorders.
- Blood Group & Type \$30**
Determines Blood Type.

Thank you for choosing Veterans Memorial Hospital's Community Wellness Testing. Your results will be mailed to you in approximately 5 business days. These tests are being performed at your request.

If your results do not arrive in the mail in 5 business days, please contact Veterans Memorial Hospital for another copy. These results will give you a picture of your current health status, but are not a substitute for an annual physical examination. If your results are normal, they do not guarantee that you do not have any health issues. The best evaluation of your health is a complete medical history accompanied by laboratory testing. If your results show they are outside of normal range, it does not necessarily mean you have a disease, but further follow up is recommended. It is your responsibility to share these results with your medical provider and make an appointment in the near future to discuss these results. We guarantee the privacy of your data until you receive it.

I voluntarily consent to a blood sample by venipuncture and I certify I understand the above paragraphs and assume responsibility for my results.

Signature: _____ Date/Time: _____

If I have a critical lab value or values which are life-threatening and requires immediate attention, I will be available at the following number: _____

My emergency contact if the laboratory is unable to contact me at the first phone number listed.

Name _____ and the phone _____

Patient Address: _____

FOR OFFICE USE ONLY

Check method of payment: check/cash visa Mastercard

Date: _____ Initials _____

Date/Time Drawn: _____ Initials _____

