



1985 DeKalb Avenue, Ste. 300  
 Sycamore, IL 60118  
 Phone: (815) 754-1122  
 Fax: (815) 787-3678

## Company Profile

Company Name: _____	
Company Contact: _____	Billing Contact: _____
Address: _____	Address: _____
_____	_____
Phone: _____	Phone: _____
Fax: _____	Fax: _____

**Services Requested:** (please check all that apply)

<input type="checkbox"/> DOT Physical: \$55.000	<input type="checkbox"/> Work Physical: \$50.00
<input type="checkbox"/> Respiratory Questionnaire (only): \$37.00	<input type="checkbox"/> Pulmonary Function/Spirometry \$87.40 (includes respiratory questionnaire):
<input type="checkbox"/> Audio Testing: \$33.25	<input type="checkbox"/> Lumbar Spine/Back X-ray: \$215.00
<input type="checkbox"/> Lift Test (by appointment): \$60.00	<input type="checkbox"/> On-Site Service Fee: \$28.00
<input type="checkbox"/> TB Skin Test: \$24.70	<input type="checkbox"/> Hepatitis B Vaccine (per injection): \$66.50 (per test) + Injection administration fee: \$23.00

**Drug Screening:** (please circle what reason for each test type your employee should be tested)

<input type="checkbox"/> Collection Only: \$15.20	Pre-employment / Post Accident / Reasonable Suspicion Random / Follow-up / Annual
<input type="checkbox"/> 5 Panel Rapid/Send out: \$25.65	Pre-employment / Post Accident / Reasonable Suspicion Random / Follow-up / Annual
<input type="checkbox"/> 5 Panel Send out + Ecstasy: \$36.00	Pre-employment / Post Accident / Reasonable Suspicion Random / Follow-up / Annual
<input type="checkbox"/> 9 Panel Rapid /Send out: \$32.20	Pre-employment / Post Accident / Reasonable Suspicion Random / Follow-up / Annual
<input type="checkbox"/> DOT/NIDA (Federal): \$47.50	Pre-employment / Post Accident / Reasonable Suspicion Random / Follow-up / Annual
<input type="checkbox"/> MRO Services: \$50.00 (done if the d/s is non-negative)	

**Breath Alcohol Testing:** (please circle what reason your employ should have a BAT performed)

<input type="checkbox"/> Breath Alcohol Test (BAT): \$20.90	Pre-employment / Post Accident / Reasonable Suspicion Random / Follow-up / Annual
<input type="checkbox"/> BAT Confirmation Test: \$30.00 (if initial test positive)	Pre-employment / Post Accident / Reasonable Suspicion Random / Follow-up / Annual

**Signature of Company Representative:** \_\_\_\_\_