



SERVING ARIZONA FOR 30 YEARS

Self-Pay Patients

Phoenix: 602-273-9000 Fax: 602-252-0006

Email: info@labxpress.com

Provider/Office Information:

PATIENT INFORMATION - PLEASE PRINT CLEARLY

LAST NAME: FIRST: MI:

ADDRESS: CITY: STATE: ZIP:

DOB SEX PHONE EMAIL

Fasting: Yes / No
Collection Date: ___/___/___
Collection Time: ___:___ AM/PM

Patient payment if collected in providers office:

Cash \$ Check: DL # Credit Card # Exp: CVV:

PANELS AND PROFILES

<input type="checkbox"/> 5666 ALLERGY, FOOD BASIC, IGE \$172 46 Allergens: Meat/Poultry, Dairy, Seafood, Fruits, Veggies, Grains	<input type="checkbox"/> 1263 CMP, LIPID PANEL \$50	<input type="checkbox"/> 1867 HEPATIC PANEL (LIVER) \$18
<input type="checkbox"/> 5665 ALLERGY, ENVIRONMENTAL, IGE \$172 45 Allergens: Grasses, Weeds, Trees, Molds, Epidermals	<input type="checkbox"/> 1368 EARLY DETECTION PACKAGE \$127 (CBC, CMP, Lipids, T4 Total, TSH, UA)	<input type="checkbox"/> 5213 PRENATAL PANEL W/ HIV \$205 (Abo/Rh, AB Screen, CBC, HBSAg, HIV, RPR, Rubella)
<input type="checkbox"/> 21617 ANA, CCP, RHEUM FACTOR \$97	<input type="checkbox"/> 20842 EARLY DETECTION PACKAGE PLUS \$144 (CBC, CMP, HgbA1c, Lipids, T4 Total, TSH, UA)	<input type="checkbox"/> 2340 RENAL FUNCTION PANEL (KIDNEY) \$20
<input type="checkbox"/> 1130 BMP - BASIC METABOLIC PANEL \$19	<input type="checkbox"/> 20810 GLUCOSE, HGBA1C, LIPID \$57	<input type="checkbox"/> 20201 PT/INR, PTT \$30
<input type="checkbox"/> 5328 CBC, CMP \$39	<input type="checkbox"/> 1561 HEPATITIS A, B, C, PANEL \$128 (Hep A AB, HBSAB, HBSAG, Hep B Core, Hep C Ab w/rfix)	<input type="checkbox"/> 2 STD - 5 PANEL \$230 (GC/Chlamydia, HIV, RPR, Herpes 1 & 2)
<input type="checkbox"/> 20706 CBC, CMP, HGB A1C, LIPIDS, TSH, T4 FREE \$143	<input type="checkbox"/> 21165 IMMIGRATION PANEL \$210 (Gonorrhea, RPR w/confirm, TB Quantiferon Gold)	<input type="checkbox"/> 5253 SUPERCHEM \$173 (CMP, Lipid, Iron, LDH, GGT, Bili D&I, Phos, Uric Acid, Mag)
<input type="checkbox"/> 21035 CBC, CMP, HGB A1C, LIPIDS, TSH \$121	<input type="checkbox"/> 1993 IMMUNITY PANEL 1 - MMR TITERS \$68	<input type="checkbox"/> 20743 TSH, FREE T4 \$56
<input type="checkbox"/> 5892 CBC, CMP, HGB A1C, LIPIDS, MICROALBUMIN, UA RANDOM \$109	<input type="checkbox"/> 20224 IRON STUDIES (Iron, TIBC, % Sat) \$38	<input type="checkbox"/> 5337 THYROID PANEL 2 \$80 (T3 Total, T4 Total, TSH)
<input type="checkbox"/> 5072 CBC, CMP, LIPID PANEL, TSH \$101	<input type="checkbox"/> 21530 IRON AND TIBC \$31	<input type="checkbox"/> 5285 THYROID PANEL 3 \$90 (T3 Free, T4 Free, TSH)
<input type="checkbox"/> 20358 CBC, CMP, TSH \$73	<input type="checkbox"/> 1860 LIPID PANEL \$28	<input type="checkbox"/> 2589 VITAMIN B12 & FOLATE \$52
<input type="checkbox"/> 5199 CMP - COMPREHENSIVE METABOLIC PANEL \$24	<input type="checkbox"/> 21351 LIPID PANEL W/LDL DIRECT \$38	

INDIVIDUAL TESTS

<input type="checkbox"/> 1001 ABO/RH BLOOD TYPE \$35	<input type="checkbox"/> 20548 HCG QUANTITATIVE, PREGNANCY \$30	<input type="checkbox"/> 2209 PT/INR \$15
<input type="checkbox"/> 21616 ALT, AST \$24	<input type="checkbox"/> 6150 HEMOGLOBIN A1C \$20	<input type="checkbox"/> 2106 PTT \$15
<input type="checkbox"/> 1065 AMYLASE \$17	<input type="checkbox"/> 1568 HEPATITIS B SURF AG W/CONFIRM \$25	<input type="checkbox"/> 2324 RHEUMATOID FACTOR \$20
<input type="checkbox"/> 21048 ANA W/RFLX TITER & PATTERN \$40	<input type="checkbox"/> 1586 HEPATITIS B SURF AB, QUALITATIVE \$25	<input type="checkbox"/> 2412 RPR (SYPHILLIS) W/RFLX TO FTA \$20
<input type="checkbox"/> 1260 CBC W/DIFF \$15	<input type="checkbox"/> 20643 HEPATITIS B SURF AB, QUANTITATIVE \$45	<input type="checkbox"/> 1388 SED RATE \$12
<input type="checkbox"/> 1220 CHOLESTEROL TOTAL \$10	<input type="checkbox"/> 1590 HEPATITIS C AB W/ REFLEX \$45	<input type="checkbox"/> 20063 TB, QUANTIFERON GOLD \$130
<input type="checkbox"/> 20088 CREATINE KINASE, TOTAL \$13	<input type="checkbox"/> 20763 HIV 1/2 4TH GEN W/RFLX \$45	<input type="checkbox"/> 2441 TESTOSTERONE FREE & TOTAL \$87
<input type="checkbox"/> 5899 COCCIDIOIDES AB IgG, IgM \$80	<input type="checkbox"/> 1690 HOMOCYSTEINE \$35	<input type="checkbox"/> 2442 TESTOSTERONE TOTAL (EIA) \$53
<input type="checkbox"/> 1270 CORTISOL TOTAL \$32	<input type="checkbox"/> 21310 IFOBT - IMMUNOCHEMICAL FECAL OCCULT BLOOD \$33	<input type="checkbox"/> 2512 T3 FREE \$34
<input type="checkbox"/> 1275 CRP (INFLAMMATION) \$20	<input type="checkbox"/> 1769 INSULIN FASTING \$20	<input type="checkbox"/> 2513 T3 REVERSE \$50
<input type="checkbox"/> 1276 CRP-HS (HIGH SENSITIVITY) \$26	<input type="checkbox"/> 1776 IRON TOTAL \$18	<input type="checkbox"/> 2514 T3 TOTAL \$30
<input type="checkbox"/> 1349 DNA PATERNITY, NON-LEGAL \$195	<input type="checkbox"/> 1850 LEAD, WHOLE BLOOD \$23	<input type="checkbox"/> 2472 T4 FREE, NON DIALYSIS \$22
<input type="checkbox"/> 1348 DNA PATERNITY, LEGAL \$245	<input type="checkbox"/> 1857 LH - LUTEINIZING HORMONE \$40	<input type="checkbox"/> 2437 T4 TOTAL \$16
<input type="checkbox"/> 1331 DHEA SULFATE (DHEA-S) \$48	<input type="checkbox"/> 1859 LIPASE \$16	<input type="checkbox"/> 5868 THYROGLOBULIN ANTIBODIES \$31
<input type="checkbox"/> 1389 ESTRADIOL (E2) \$57	<input type="checkbox"/> 1923 MAGNESIUM \$17	<input type="checkbox"/> 2462 THYROID PEROXIDASE-ANTI TPO \$40
<input type="checkbox"/> 1396 ESTROGEN TOTAL \$66	<input type="checkbox"/> 5148 MICROALBUMIN URINE \$20	<input type="checkbox"/> 2523 TSH \$34
<input type="checkbox"/> 1438 FERRITIN \$27	<input type="checkbox"/> 21395 MICROALBUMIN W/ CREATININE RATIO, U \$25	<input type="checkbox"/> 5352 TSH W/ REFLEX TO T4 FREE \$45
<input type="checkbox"/> 1446 FOLATE, SERUM \$22	<input type="checkbox"/> 2134 PHOSPHORUS \$11	<input type="checkbox"/> 2549 URIC ACID \$10
<input type="checkbox"/> 1448 FSH \$40	<input type="checkbox"/> 1525 PREGNANCY QUALITATIVE, SERUM \$16	<input type="checkbox"/> 5076 URINALYSIS RANDOM \$10
<input type="checkbox"/> 1487 GLUCOSE (FASTING) \$9	<input type="checkbox"/> 2177 PROGESTERONE \$40	<input type="checkbox"/> 5675 UA W/MICROALBUMIN & CREATININE \$35
<input type="checkbox"/> 1488 GLUCOSE TOLERANCE 1 HOUR \$15	<input type="checkbox"/> 2181 PROLACTIN \$40	<input type="checkbox"/> 5664 URINALYSIS W/RFLX CULTURE \$28
<input type="checkbox"/> 1490 GLUCOSE TOLERANCE 3 HOUR \$40	<input type="checkbox"/> 5112 PROTEIN/CREATININE, URINE \$17	<input type="checkbox"/> 2551 URINE CULTURE & SENSITIVITY \$38
<input type="checkbox"/> 1212 GONORRHEA & CHLAMYDIA, U \$120	<input type="checkbox"/> 2183 PSA TOTAL \$35	<input type="checkbox"/> 2581 VARICELLA ZOSTER AB, IGG \$30
<input type="checkbox"/> 20958 H-PYLORI STOOL TEST \$55	<input type="checkbox"/> 2184 PSA FREE & TOTAL \$70	<input type="checkbox"/> 2590 VITAMIN B12 \$30
<input type="checkbox"/> 20153 H-PYLORI BREATH, ADULT \$125	<input type="checkbox"/> 2220 PTH INTACT \$50	<input type="checkbox"/> 20376 VITAMIN D, 25-HYDROXY \$50

ADDITIONAL TESTS

A draw fee of \$15 is due at the time of service.

Mobile Phlebotomy available through Getlabs/labxpress.com

Prices are subject to change without notice.