



Cheyenne Regional

Health Screening Center

STAMPER OR PATIENT LABEL

Patient Name: _____ Patient DOB: _____

Address _____ Phone: _____

Do you have a MyChart account? Yes No Payment Type: Cash Card Check

Code	Test	Price	Code	Test	Price
Lab806	Chemistry Health Screen Profile w/TSH	\$35.00	Lab67	Vitamin B-12	\$20.00
Lab129	TSH- DO NOT order w/Lab806	\$20.00	Lab69	Folate	\$20.00
Lab1748	CBC with auto differential	\$15.00	Lab126	Total T4	\$15.00
Lab90	Hemoglobin A1c	\$20.00	Lab206	Rheumatoid Factor	\$20.00
Lab535	Vitamin D 25 Hydroxy	\$30.00	Lab6259	BNP	\$50.00
Lab68	Ferritin	\$20.00	Lab8029	Anti-TPO	\$20.00
Lab116	PSA-Prostate Specific Antigen	\$25.00	Lab8028	Thyroglobulin Ab	\$25.00
Lab127	Free T4	\$15.00	Lab8019	Anti-CCP	\$25.00
Lab137	Free T3	\$20.00	Lab8001	Celiac Panel	\$45.00
Lab150	High Sensitivity C-Reactive Protein	\$20.00	Lab8062	Food Allergen Panel	\$150.00
Lab895	Blood Type and Rh	\$20.00	Lab8036	Respiratory Allergen Panel	\$180.00
Lab124	Testosterone, Total	\$30.00	Lab5650	Insulin	\$20.00

Total _____

No insurance will be billed, and billing information will not be provided for the above tests. Payments made at the time of service cover the above marked tests only. You may be separately responsible for any additional testing performed that was not marked here. Please ask if any additional testing ordered by your provider is being performed.

If your test results show any abnormality; it is highly recommended that your primary care be informed promptly. For this purpose, please indicate your provider's name, city, and state below:

Provider: _____

If patient indicates a provider; patient must sign an Authorization to Release Healthcare Information

City: _____ State: _____

Signature of Patient or Legal Representative

Date



MRC Approved: 10/2024

Original:2020
Revised:2022, 2024

LABS
Form #5006

LABRS – LAB REQUISTION SCAN



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ROLE OF CRMC LABORATORY IN DIRECT ACCESS TESTING: This is to certify that I consent to and authorize Cheyenne Regional Medical Center (CRMC) to collect my blood for analysis of the marked Direct Access Laboratory Testing. Direct Access Testing (DAT) is patient-initiated testing that does not require a physician’s order. I authorize CRMC to release my results to me through methods available and applicable to my situation. I understand that the CRMC Laboratory is not acting as my medical provider, that this does not replace treatment by a healthcare provider and that I assume complete and full responsibility to take appropriate action regarding test results, up to and including consulting with a physician. **I understand that the DAT results do not substitute for medical advice, diagnosis, or treatment.** The CRMC Laboratory Director does not receive or review DAT results. I understand that there is no doctor-patient relationship between me and the Laboratory Director or any CRMC personnel. CRMC staff, including the Laboratory Director, will not interpret, act on, or provide medical advice regarding the DAT results. CRMC, the Laboratory Director, and other personnel are not liable for any decisions or actions taken based on the information from this DAT program. **I understand that the results will not be sent to my medical provider unless indicated on the requisition, and that it is ultimately my responsibility to share the lab results with my medical provider. I agree that I will seek medical advice, care, and/or treatment from my medical provider if I have questions or concerns about the significance of the laboratory results.** Should my medical provider review my results and request additional laboratory tests, I understand that a new sample will need to be collected. Additional tests will not be performed on the DAT sample.

LIMITATIONS OF LABORATORY TESTING: The CRMC Laboratory is a CLIA-certified laboratory and follows stringent quality-control standards. However, all laboratory tests are known to have a certain percentage of false-negative results (disease is present, but lab value is normal) and false-positive results (no disease is present, but lab value is abnormal). **I understand that a normal laboratory result does not exclude the presence of serious disease.** People with cancer and other serious diseases can have normal laboratory values. **Conversely, I understand that abnormal laboratory results do not necessarily indicate that disease is present.** Many variables, such as diet, exercise, medications/supplements, and inflammatory conditions can affect laboratory values. In addition, the conditions to which blood is subjected during and after collection (before being tested in the laboratory) can affect laboratory values. I understand that I should consult with my medical provider to determine the significance of my laboratory values, whether they are normal or abnormal.

CRITICAL VALUE RESULTS: Certain laboratory values are considered “critical values”, which may be potentially life threatening and require urgent medical attention by a health care provider, such as a primary care provider, urgent care facility, or an emergency room medical provider. If my DAT results show a “critical value,” the laboratory staff will call me to give me the critical value result and will recommend that I contact a health care provider immediately. **I understand that it is my responsibility to immediately report any critical value to my health care provider, an urgent care facility, or to an emergency room provider. I understand that the CRMC Laboratory is not responsible for calling my medical provider with any critical values obtained.** I agree that the CRMC Laboratory may leave a voicemail message asking me to call the CRMC Laboratory immediately to obtain a critical result. In the event that the CRMC Laboratory cannot reach me, I agree that the CRMC Laboratory can call my listed “Emergency contact,” to ask them to help notify me to call the CRMC Laboratory immediately. I understand that CRMC will not disclose any details about the test results with the listed contact.

RECEIPT OF RESULTS AND PRIVACY POLICY: DAT results can be accessed via my CRMC MyChart account, if I have an account activated. In addition, the DAT results will be mailed to me. **Since results will be mailed to my address, I accept responsibility should someone else at that address access these results.** Personal information collected from customers will not, unless required by law, be shared with any third party. The primary reason CRMC collects personal information is for identification purposes and to enable me to obtain test results. CRMC does not distribute unsolicited e-mails, nor, unless required by law, does CRMC share the names of customers with any third party.

VENIPUNCTURE RISKS AND EMPLOYEE EXPOSURE POLICY: I understand that the venipuncture process involves a small medical risk and may result in bruising around the area from which the blood is taken. In the event of an accidental needle puncture to the CRMC staff member involved in the blood collection process, I consent to any routine blood test deemed necessary for the safety of the phlebotomist, including tests for viral hepatitis and HIV. The results of any such testing will be shared with me.

PAYMENTS (Third party or otherwise) AND REIMBURSEMENT: I agree to take full financial responsibility for the tests requested and I understand that full payment is required prior to specimen collection. I understand that the requested tests will not be billed to a third party by CRMC. Provider, diagnosis, and tax ID information will not be provided. No other billing will occur, and there is no refund option available. **I have read, understand, and agree to the above provisions:**

Signature of Patient or Legal Representative

Date

Witness Signature

Date

MRC Approved: 10/2024

Original:2020
Revised:2022, 2024

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