

**\* = Requires 10 hour fast    \*\*=Female Health Complete and Female Hormone Panel are recommended 7 days before menses**

Separate Labs	Price	Lab Panels	Price
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ANA SCREEN/REFLEX TITER 2320099	<input type="checkbox"/>	\$29.00
APO E GENOTYPE 2193479	<input type="checkbox"/>	\$75.00
VITAMIN B12/FOLATE PANEL 2127959	<input type="checkbox"/>	\$15.00
BLOOD TYPE/RH (A,B,O Group & Rh Type) 2170700	<input type="checkbox"/>	\$27.00
COMPLETE BLOOD COUNT (CBC) WITH DIFF 2180036	<input type="checkbox"/>	\$9.00
*COMPREHENSIVE METABOLIC PANEL*(CMP) (chemistry) 2120356	<input type="checkbox"/>	\$12.00
C-REACTIVE PROTEIN, HIGH SENSITIVITY (CRP) 2127196	<input type="checkbox"/>	\$15.00
DHEA SULFATE 2127270	<input type="checkbox"/>	\$15.00
DIHYDROTESTOSTERONE, LC/MS/MS (DHT) 2190241	<input type="checkbox"/>	\$40.00
ESTRADIOL 2127310	<input type="checkbox"/>	\$15.00
Estriol 2190532	<input type="checkbox"/>	\$41.00
Estrone LC/MS/MS 2190530	<input type="checkbox"/>	\$33.00
FERRITIN (serum) 2120280	<input type="checkbox"/>	\$15.00
FSH (FOLLICLE STIMULATING HORMONE) 2127401	<input type="checkbox"/>	\$15.00
G-6-PD, GLUCOSE-6-PHOSPHATE DEHYDRIGENASE, QUANT. 2192832	<input type="checkbox"/>	\$27.00
GAMMA GLUTAMYL TRANSFERASE (GGT) 2120187	<input type="checkbox"/>	\$17.00
*GLUCOSE (Serum) * 2121157	<input type="checkbox"/>	\$15.00
HEMOGLOBIN A1C 2122798	<input type="checkbox"/>	\$15.00
HOMOCYSTEINE, (Plasma) 2128702	<input type="checkbox"/>	\$23.00
Iron & TIBC (Transferrin w/calculated TIBC) 2122670	<input type="checkbox"/>	\$15.00
LH Lutenizing Hormone 2127411	<input type="checkbox"/>	\$15.00
*LIPID PANEL (AMA)* (Basic Cholesterol) 2120311	<input type="checkbox"/>	\$15.00
Lyme Immunoblot IgG/IgM 2192691	<input type="checkbox"/>	\$36.00
MAGNESIUM, RBC 2197962	<input type="checkbox"/>	\$27.00
METHYLMALONIC ACID, Serum 2198337	<input type="checkbox"/>	\$25.00
*NMR LIPOPROTEIN FRACTIONATION, NMR w/LIPIDS (CHL)* 2193594	<input type="checkbox"/>	\$42.00
PROSTATE SPECIFIC ANTIGEN (PSA), FREE & TOTAL 2127337	<input type="checkbox"/>	\$25.00
PROSTATE SPECIFIC ANTIGEN (PSA), TOTAL 2120335	<input type="checkbox"/>	\$15.00
PROGESTERONE 2127521	<input type="checkbox"/>	\$15.00
ERYTHROCYTE SEDIMENTATION RATE (ESR) Sed Rate 2180065	<input type="checkbox"/>	\$15.00
T3 REVERSE, LC/MS/MS SERUM 2197552	<input type="checkbox"/>	\$25.00
RHEUMATOID FACTOR (RF) QUANTITATIVE 2120097	<input type="checkbox"/>	\$15.00
THYROXINE (T4) 2120253	<input type="checkbox"/>	\$15.00
TESTOSTERONE, FREE (DIALYSIS) & TOTAL (LC/MS/MS) 2196311	<input type="checkbox"/>	\$27.00
THYROGLOBULIN ANTIBODY (Anti-Tg) 2120108	<input type="checkbox"/>	\$15.00
TPO ANTIBODY (Microsomal) 2120110	<input type="checkbox"/>	\$19.00
TSH (THYROID STIMULATING HORMONE) 2120255	<input type="checkbox"/>	\$15.00
URIC ACID, SERUM 2120181	<input type="checkbox"/>	\$15.00
URINALYSIS, WITH MICROSCOPIC, REFLEX CULTURE (UA) 2189007	<input type="checkbox"/>	\$15.00
VITAMIN D, 25-OH (TOTAL D2/D3) 2128210	<input type="checkbox"/>	\$20.00
ZINC, RBC 2192016	<input type="checkbox"/>	\$31.00

ALLERGENS (22)-INHALANT PANEL, MIDWEST IgE Health Lab 2126560	<input type="checkbox"/>	\$147.00
ANEMIA PANEL: (Iron & TIBC, Ferritin, CBC, CMP, B12, Folate)	<input type="checkbox"/>	\$30.00
AUTOIMMUNE PANEL: (ANA w/Reflex titer, RF, CCP Sed Rate, Uric Acid, CRP)	<input type="checkbox"/>	\$45.00
* BLOOD SUGAR PANEL: Insulin, CMP-including glucose, HgA1C, Leptin, CRP (hs) *	<input type="checkbox"/>	\$45.00
CELIAC DISEASE PANEL: (Deaminated gliadin peptide IgA, tTg, total IgA) 2109546	<input type="checkbox"/>	\$35.00
*FEMALE HEALTH COMPLETE: (CBC, Chemistry Panel, Lipids, TSH, Free T3, Free T4, CRP-hs, Vit D, DHEA (s), Estradiol, Progesterone, Iron, Ferritin, Free & Total Testosterone, Uric Acid, Cortisol, LH, FSH, B12, GGT, Magnesium, HgbA1C) <b>** 7 days before menses</b>	<input type="checkbox"/>	\$149.00
FEMALE HORMONE PANEL: (FSH, LH, Progesterone, Estradiol, Free/Total Testosterone, DHEA, Cortisol, SHBG) <b>** 7 days before menses</b>	<input type="checkbox"/>	\$45.00
FOOD SENSITIVITY (IgG- US Biotek, 96 Foods)	<input type="checkbox"/>	\$195.00
*LIPID COMPREHENSIVE PANEL: (Apolipoprotein Evaluation, NMR Lipoprofile, Omega Check, Lp pla2, Homocysteine, Uric Acid, CPR-hs, Lipoprotein(a), HgbA1C, CMP, Magnesium)*	<input type="checkbox"/>	\$149.00
*MALE HEALTH COMPLETE: (CBC, Chemistry Panel, Lipids, TSH, Free T3, Free T4, Vit D, DHEA (s), Ferritin, Uric Acid, Free & Total Testosterone, B12, GGT, HgbA1C, Magnesium, PSA Total, Cortisol, LH, CRP-hs)	<input type="checkbox"/>	\$149.00
MALE HORMONE PANEL: (LH, Free/Total Testosterone, Estradiol, Progesterone, DHEA (s), Cortisol, PSA)	<input type="checkbox"/>	\$45.00
*OMEGA CHECK: (EPA/DHA, Omega3/Omega6 Ratio, Arachadonic Acid)* 2193344	<input type="checkbox"/>	\$35.00
THYROID AUTOIMMUNE PANEL: (TSH, FreeT3, Free T4, antiTPO, Anti-Thyroglobulin)	<input type="checkbox"/>	\$40.00
THYROID BASIC PANEL: (TSH, Free T3, Free T4)	<input type="checkbox"/>	\$25.00
THYROID COMPREHENSIVE PANEL: (TSH, Free T3, Free T4, antiTPO, Reverse T3, Cortisol, Anti-Thyroglobulin, DHEA (s))	<input type="checkbox"/>	\$60.00
PEDIATRIC IgE FOOD ALLERGY PANEL (Immunocap) 2126558	<input type="checkbox"/>	\$140.00
CMV/EBV PANEL: (CMV IgM/IgG, EBV Antibody Panel)	<input type="checkbox"/>	\$55.00

**Please list any labs you need that are not listed on this form:**

1  
2  
3

<b>PATIENT INFORMATION:</b>	<b>TODAY'S DATE:</b>
NAME:	DATE OF BIRTH:
ADDRESS:	
PHONE:	
<b>PLEASE COMPLETE THIS SECTION</b>	

<b>INSTRUCTIONS:</b>
1. Check off labs you would like drawn
2. Fill out personal information.
3. Fax or email Lab Form to Family Clinic (info@familynaturalmedicine.com)
4. Call clinic to make appointment (608.222.2700)
5. Do you want lab results sent to your doctor via fax?
Doctor Name: _____ Doctor Fax: _____
<b>&gt;&gt; Lab Draw Fee: \$35.00 Multiple kits will add additional fees &lt;&lt;</b>
<b>Lab prices subject to change without notice</b>

**\*PLEASE ALLOW 24 HOURS FOR CANCELLATIONS/RESCHEDULES APPOINTMENTS**

LATE CANCELLATIONS/RESCHEDULES ARE SUBJECT TO A \$35 FEE\*