# Macon County Health Department

1221 E. Condit Street, Decatur, IL 62521
217/423-6988

Name: _____ DOB: _____ Ins. ☐ Cash ☐

| | Venipuncture Fee | | ☐ $25.00 |
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## Laboratory Services - Special Client Testing/Billing Sheet

| Test Code | Test Name | Diagnosis Code | Price |
|---|---|---|---|
| 006056 | ABO Grouping | DX: | ☐ $8.00 |
| 006049 | ABO Grouping and Rho(D) Typing | DX: | ☐ $16.00 |
| 117739 | Alpha-2 Antiplasmin | DX: | ☐ $58.00 |
| 001396 | Amylase | DX: | ☐ $5.86 |
| 006015 | Antibody Screen | DX: | ☐ $10.50 |
| 015040 | Antithrombin Activity | DX: | ☐ $27.00 |
| 322758 | Basic Metabolic Panel (8) BMP | DX: | ☐ $4.95 |
| 008300 | Blood Culture, Routine | DX: | ☐ $31.00 |
| 006627 | C Reactive Protein, Quant | DX: | ☐ $8.22 |
| 005009 | CBC With Differential/Platelet | DX: | ☐ $5.00 |
| 028142 | CBC, Platelet, No Differential | DX: | ☐ $4.95 |
| 183194 | Chlamydia/GC Amplification | DX: | ☐ $42.00 |
| 001065 | Cholesterol, Total | DX: | ☐ $4.25 |
| 322000 | Comprehensive Metabolic Panel (14) MBP | DX: | ☐ $5.55 |
| 004051 | Cortisol | DX: | ☐ $12.60 |
| 115188 | D-Dimer | DX: | ☐ $26.00 |
| 500161 | DHEA-Sulfate, Serum | DX: | ☐ $30.25 |
| 117853 | DIC Comprehensive Panel Plus | DX: | ☐ $343.91 |
| 004515 | Estradiol | DX: | ☐ $28.50 |
| 086249 | Factor V Activity | DX: | ☐ $75.00 |
| 086264 | Factor VIII Activity | DX: | ☐ $75.00 |
| 004598 | Ferritin | DX: | ☐ $9.88 |
| 001610 | Fibrinogen Activity | DX: | ☐ $19.06 |
| 002014 | Folate (Folic Acid), Serum | DX: | ☐ $11.14 |
| 004309 | FSH | DX: | ☐ $15.00 |
| 028480 | FSH and LH | DX: | ☐ $30.00 |
| 100768 | Glomerular Filtration Rate, Estimated (Creatinine) | DX: | ☐ $4.25 |
| 001032 | Glucose (serum) | DX: | ☐ $4.25 |
| 006510 | HBsAg Screen | DX: | ☐ $12.00 |
| 144050 | HCV Antibody RFX to Quant PCR | DX: | ☐ $14.50 |
| 001453 | Hemoglobin A1c | DX: | ☐ $7.99 |
| 006395 | Hep B Surface Ab, Qual | DX: | ☐ $11.06 |
| 322755 | Hepatic Function Panel (7) | DX: | ☐ $4.85 |
| 006530 | Hepatitis B Surface Antibody, Quantitative | DX: | ☐ $11.06 |
| 102525 | Hgb A1c with eAG Estimation | DX: | ☐ $7.99 |
| 002238 | Immunoglobulin G Index | DX: | ☐ $46.25 |
| 083935 | HIV Ab/p24 Ag with Reflex | DX: | ☐ $20.00 |
| 004333 | Insulin | DX: | ☐ $9.29 |
| 001321 | Iron and TIBC | DX: | ☐ $10.00 |

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|---|---|---|---|---|
| 007625 | Lead, Blood (Adult) | DX: | ☐ | $10.50 |
| 700433 | Lead, Maternal Blood | DX: | ☐ | $10.50 |
| 001404 | Lipase Only | DX: | ☐ | $5.86 |
| 303756 | Lipid Panel | DX: | ☐ | $6.00 |
| 004283 | Luteinizing /Hormone (LH) | DX: | ☐ | $15.00 |
| 001537 | Magnesium | DX: | ☐ | $6.00 |
| 096560 | Measles Antibodies, IgG | DX: | ☐ | $14.50 |
| 058495 | Measles/Mumps/Rubella Immunity MMR | DX: | ☐ | $37.75 |
| 096552 | Mumps Antibodies, IgG | DX: | ☐ | $13.25 |
| 140659 | Panel 140659 | DX: | ☐ | $14.50 |
| 117713 | Plasminogen Activity | DX: | ☐ | $52.50 |
| 005249 | Platelet Count | DX: | ☐ | $4.85 |
| 144053 | Pregnancy, Initial Screen | DX: | ☐ | $151.75 |
| 004317 | Progesterone | DX: | ☐ | $17.44 |
| 004465 | Prolactin | DX: | ☐ | $17.44 |
| 010322 | Prostate-Specific Ag | DX: | ☐ | $13.78 |
| 005199 | Prothrombin Time (PT) | DX: | ☐ | $3.25 |
| 480772 | PSA Total (Reflex to Free) | DX: | ☐ | $13.78 |
| 005207 | PTT, Activated | DX: | ☐ | $3.25 |
| 182879 | QuantiFERON Gold Plus | DX: | ☐ | $50.00 |
| 070104 | Reverse T3, Serum | DX: | ☐ | $35.00 |
| 006064 | Rh Factor | DX: | ☐ | $8.00 |
| 006072 | RPR | DX: | ☐ | $5.25 |
| 012005 | RPR, Rfx QN RPR/Confirm TP SyphilisTITERS | DX: | ☐ | $5.25 |
| 006197 | Rubella Antibodies, IgG | DX: | ☐ | $10.00 |
| 082016 | Sex Hormone Binding Glob, Serum | DX: | ☐ | $26.50 |
| 001156 | T3 Uptake | DX: | ☐ | $5.00 |
| 070195 | Testosterone, Free and Total | DX: | ☐ | $60.25 |
| 144980 | Testosterone, Free, Direct | DX: | ☐ | $30.00 |
| 070001 | Testosterone, Total, LC/MS | DX: | ☐ | $30.25 |
| 000455 | Thyroid Panel | DX: | ☐ | $10.75 |
| 000620 | Thyroid Panel with TSH | DX: | ☐ | $22.75 |
| 006676 | Thyroid Peroxidase (TPO) Ab | DX: | ☐ | $10.39 |
| 001149 | Thyroxine (T4) | DX: | ☐ | $5.75 |
| 001974 | Thyroxine (T4), Free Direct | DX: | ☐ | $12.99 |
| 001172 | Triglycerides | DX: | ☐ | $4.25 |
| 010389 | Triiodothyronine T3 Free | DX: | ☐ | $24.80 |
| 004259 | TSH | DX: | ☐ | $12.00 |
| 003772 | Urinalysis Complete | DX: | ☐ | $6.00 |
| 008847 | Urine Culture, Routine | DX: | ☐ | $10.50 |
| 096206 | Varicella-Zoster V Ab, IgG VZV | DX: | ☐ | $16.00 |
| 001503 | Vitamin B 12 | DX: | ☐ | $13.70 |
| 081950 | Vitamin D, 25-Hydroxy | DX: | ☐ | $30.50 |
| Highlighted in Yellow send to Harmone Lab, 1622 S Taylorville Road, Decatur, IL 62521 | | | ☐ | |

Date: _____ Signature: _____ TOTAL PRICE _____

Cash _____ Check No. _____ Credit Card _____

labcorp