



7/2019 – 6/2020

Occupational & Employee Health Services – Attachment A

	<u>Base Price</u>	<u>Discounted Price</u>
Pre-Placement Physical <i>(Includes: medical history, height/weight, vitals, vision/color screening and provider exam)</i>	\$78.00	\$65.00
9-panel Urine Drug Screen with Oxy (Non-DOT)	\$78.00	\$65.00
Breath Alcohol Test	\$28.45	
Breath Alcohol Test Confirmation	\$28.45	\$18.45
PPD	\$16.50	13.00
PPD Read (Included)	No Charge	
Tuberculosis Questionnaire	\$11.35	
Chest X-Ray (2 View)	\$73.55	
Hepatitis B Titre	\$28.45	
Hepatitis B Vaccine (Series of 3)	\$67.25/each	\$63.00
Venipuncture	\$ 3.25	
DOT Physical <i>(Initial & Recert)</i> <i>Includes medical history, height/weight/vitals, vision/color, Timus (depth & peripheral)urine dip and provider exam</i>	\$78.00	\$57.55
DOT Urine Drug Screen	\$78.00	\$57.55

Workers Compensation rates are pre-negotiated with each compensation carrier.

Company Name: Springfield Township Board of Education

Date: _____

Initials: _____