

RECEIPT FOR SERVICES – COMPREHENSIVE URINE TESTING

PATIENT INFORMATION:

Patient name:

Patient Address:

TEST INFORMATION

Date:

Urine Test Profile: Comprehensive Hormone Profile

Procedure Code	Analyte	Description	Charge	
84135	b-Pregnanediol	Assay of pregnanediol	\$30.69	
82160	Androsterone	Assay of androsterone	\$30.69	
84403	Testosterone	Assay of total testosterone	\$30.69	
82542	a-Androstanediol	Column chromatography quant	\$30.69	
82679	16-Hydroxyestrone	Assay of estrone	\$30.69	
82670	Estradiol	Assay of estrogens	\$30.69	
82677	Estriol	Assay of estrogens	\$30.69	
82530	Cortisol (x4)	Cortisol free	\$30.69	
82570	Creatinine (x4)	Assay of urine creatinine	\$30.69	
83789	Cortisone (x4)	Mass spectrometry quant	\$30.69	
82626	DHEA	Dehydroepiandrosterone	\$30.70	
83491	b-Tetrahydrocortisone	Assay of corticosteroids 17	\$30.70	
82696	Etiocholanolone	Etiocholanolone	\$30.70	
Payment Method:	<input type="checkbox"/> Cash	Total Charges:	\$399.00	
	<input type="checkbox"/> Check		Payment:	\$399.00
	<input checked="" type="checkbox"/> Charge			Balance Due:

LABORATORY:

Precision Analytical
 3138 NE Rivergate Suite #301C
 McMinnville, OR 97128
 (503)687-2050