









LIMA ROTARY SEMI-ANNUAL BLOOD CLINIC

Saturday, November 3 | 6:30 to 9:30 a.m.

Senior Citizens Services, Inc. | 3400 West Elm Street, Lima, OH

TESTS OFFERED | for 18 years of age or older

<input type="checkbox"/>	\$35	General Health Screen (CMP, Lipid Panel, Renal Panel, Hepatic Panel, CBC) * 12-hour fast required	
<input type="checkbox"/>	\$25	Thyroid Screen (TSH-R reflex free T4 if indicated)	
<input type="checkbox"/>	\$15	Diabetes Screen (HA _{1C})	
<input type="checkbox"/>	\$40	Prostate Cancer Screen (PSA)	
<input type="checkbox"/>	\$40	Vitamin D	
<input type="checkbox"/>	\$15	Uric Acid	
<input type="checkbox"/>	\$15	Iron	
<input type="checkbox"/>	\$40	Hepatitis C (HCV)	
			\$ _____ TOTAL

SCREENING INFORMATION | please print

PATIENT NAME _____ PATIENT PHONE _____
First Middle Initial Last

DATE OF BIRTH ____/____/____ MALE FEMALE FAMILY PHYSICIAN _____
Month / Day / Year

PATIENT ADDRESS _____
Street / P.O. Box Apt# City State Zip

Please make checks payable to the Lima Rotary Club.

