



Mountain Medical Immediate Care Self-Drug Testing Information Sheet

4 Panel: \$37.00 (DFWNTG)

Amphetamines
Cocaine
Opiates
Phencyclidine (PCP/Angel Dust)

5 Panel: \$40.00 (DFW50G)

Amphetamines
Cocaine
Marijuana
Opiates
Phencyclidine (PCP/Angel Dust)

9 Panel: \$45.00 (SAP750F)

Alcohol
Amphetamines
Barbiturates
Benzidiazepines
Cocaine
Ecstasy
Marijuana
Opiates
Phencyclidine (PCP)

12 Panel: \$50.00(EDS50F)

Alcohol
Amphetamines
Barbiturates
Benzodiazepines
Cocaine
Ecstasy
Marijuana
Methadone
Methaqualone
Opiates
Phencyclidine (PCP)
Propoxyphene

DOT 5 Panel: \$55.00

Breath Alcohol: \$35.00

Oral Mouth Swab: \$50.00

{ 5 panel drug test }

EtG Only: \$50.00

Medical Review: \$40.00

Collection Only: \$20.00

{ Chain of Custody provided }

*Ask the receptionist about other panels we can offer

Patient/Donor Information

***All information is kept confidential & will only be released to you.**

Name: _____ DOB: _____

Driver's License or Passport Number: _____ Phone Number: _____

Address: _____ City, State, Zip: _____

What method of notification would you like for drug test/alcohol results?

- Telephone, is it ok for us to leave a voice mail? YES NO
- Email, email address: _____
- Fax, fax number: _____
- US mail, mailing address: _____

SELF TESTING ACCOUNT # 55

Amount Paid: _____ Payment Method: Cash Check Visa

Date: _____ Time: _____ Witness: _____