



Testing Referral

Amended Order

** Holiday Testing Hours - Unless Otherwise Posted*

<p>ROMEO 105 Peyerk Court, Romeo, MI 48065</p> <p>Monday – Friday: 6:30am - 9:30am & 4pm - 7pm</p> <p>Saturday & Sunday: 7am - 10am</p> <p>Holidays: 7am -10am*</p>	<p>CLINTON TOWNSHIP 43550 Elizabeth Road, Clinton Township, MI 48036</p> <p>Monday – Friday: 6am - 9am & 4pm - 8pm</p> <p>Saturday & Sunday: 7am - 10am & 4pm - 7pm</p> <p>Holidays: 7am - 10am*</p>	<p>STERLING HEIGHTS 34224 Van Dyke Avenue, Sterling Heights, MI 48312</p> <p>Monday – Friday: 6am - 9am & 5pm - 8pm</p> <p>Saturday & Sunday: 7am - 10am & 4pm - 7pm</p> <p>Holidays: 7am - 10am & 4pm - 7pm*</p>	<p>MADISON HEIGHTS 26747 John R Road, Madison Heights, MI 48071</p> <p>Monday – Friday: 6am - 9am & 5pm - 8pm</p> <p>Saturday & Sunday: 7am - 10am & 4pm - 7pm</p> <p>Holidays: 7am - 10am*</p>	<p>TROY 1961 W South Blvd., Troy, MI 48098</p> <p>Monday – Friday: 6am - 9am & 5pm - 8pm</p> <p>Saturday & Sunday: 7am - 10am & 4pm - 7pm</p> <p>Holidays: 7am - 10am*</p>
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** Holiday Testing Hours - Unless Otherwise Posted*

Name: _____ Case #: _____
(Last, First)

Address: _____ City: _____ Zip: _____

D.O.B.: _____ Phone#: _____ Gender: **Male** **Female** _____

Referring Agency: _____

Sent Results To: _____
Name Fax/Email

Report to testing site by: _____ Duration of Testing: _____

<u>Instant Screens</u>	Per Month	Per Week
6 Panel		
10 Panel		
12 Panel		
PBT		
*LC/MS/MS \$25		
Other:		

<u>In Lab Screens</u>	Per Month	Per Week
6 Panel		
10 Panel		
12 Panel		
ETG		
6 Panel + ETG		
*ETS Confirmation \$25		
Other:		

Attend Impact Panel by: _____ \$45
Call (586) 281-0150 to schedule

Holiday Testing

Other/Special Instructions: _____

- \$25 Intake Fee will be charged at the first visit. This is a one-time fee.
- Clients reporting for the first time must arrive 20 minutes prior to closing.
- Photo ID must be provided at time of intake and testing
- Testing must be paid for by cash or money order prior to testing
- Clients with prescriptions should report for intake during a.m. hours or within the first hour of the p.m. shift to avoid a wait.
- *Confirmation fees are not included in the price of the test (Instant Dip Tests and In Lab Screens). Auto Confirmation Panels available for an additional \$3-\$5 per test depending on the panel selected.

All clients are tested on random basis determined by frequency specified above. If no referral is received or no frequency is specified, client will be placed on frequency of 1 tests per week until otherwise specified by the referring party. *I hereby authorize the testing agency to receive and release any information regarding drug and alcohol testing to the referring party. I agree to the terms and conditions put forth during my intake session.*

Client Signature

Date