

# Northern Maine Community College Health Center

## Medical Compliance Order Form



Although the NMCC Health Center must ensure your medical compliance requirements, you are not obligated to use the college's Health Center to receive medical care or to provide the required documentation. However, if you want to use our services, we have continued our commitment to keeping costs as low as possible. Below are our prices for immunizations, laboratory tests and physical exams. Should you want to use the NMCC Health Center to ensure your compliance, please return this form as soon as possible. If you have any questions, please call the Health Center at (207) 768-2803.

Name \_\_\_\_\_ Maiden \_\_\_\_\_  
please print      First                      M.                      Last                      (if different)

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Program of Study \_\_\_\_\_

E-mail \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_

Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

**PLEASE CHECK THE APPROPRIATE BOX(ES):**

I want the complete NMCC Health Compliance package. I understand that the \$450 charge will be applied to my student account. This fee covers the cost of providing any health care compliance element required for admission into any NMCC program. I understand that the full cost is my responsibility, is non-refundable, and will be applied to my account whether or not I meet scheduled appointments. A one working day prior notice is required for rescheduling of appointments.

I want the NMCC Health Center to provide only the item(s) checked below. I understand that the charges for health care compliance items(s) checked below will be applied to my student account. I understand that the full cost is my responsibility, is non-refundable, and will be applied to my account whether or not I meet scheduled appointment. A one working day prior notice is required for rescheduling of appointments.

- |  |       |  |      |
|--|-------|--|------|
| <input type="checkbox"/> Hepatitis B Series (3 injections) | \$150 | <input type="checkbox"/> Influenza               | \$25 |
| <input type="checkbox"/> Physical Exam                     | \$110 | <input type="checkbox"/> Varicella Titer         | \$45 |
| <input type="checkbox"/> CBC (blood test)                  | \$40  | <input type="checkbox"/> Rubella Titer           | \$45 |
| <input type="checkbox"/> TD (tetanus/diphtheria)           | \$35  | <input type="checkbox"/> Rubeola Titer           | \$45 |
| <input type="checkbox"/> PPD (TB test)                     | \$25  | <input type="checkbox"/> Mumps Titer             | \$45 |
| <input type="checkbox"/> MMR # 1 (measles, mumps, rubella) | \$85  | <input type="checkbox"/> Urinalysis              | \$15 |
| <input type="checkbox"/> MMR #2                            | \$85  | <input type="checkbox"/> UA REFLUX               | \$35 |
| <input type="checkbox"/> RAPID STREP                       | \$10  | <input type="checkbox"/> HIV                     | \$50 |
| <input type="checkbox"/> LIPID PROFILE                     | \$50  | <input type="checkbox"/> TSH REFLUX              | \$70 |
| <input type="checkbox"/> HbA1C                             | \$50  | <input type="checkbox"/> CMP                     | \$30 |
| <input type="checkbox"/> TDAP                              | \$55  | <input type="checkbox"/> Hepatitis Titer         | \$45 |
| <input type="checkbox"/> Therapeutic Counseling            | \$35  | <input type="checkbox"/> Medical Clearance Forms | \$25 |

Please return this form to reserve a scheduled appointment at the NMCC Health Center. – Revised 1/22/2018