Express Ocupational Medicine Clinic

ANNUAL RFP #1475 - 1

MINIMUM REQUIREMENTS - LABORATORY SERVICES: DRUGS & ALCOHOL TESTING - COUNTY EMPLOYEES

(Prices must include all Laboratory Diagnostic Services and Fees)

DIAGNOSTIC PROCEDURE	ESTIMATED NUMBER OF REQUESTS		SPECIFY PRICE PER TEST REQUEST		TOTAL PRICE
DRUG DRAW & TESTING (URINE) - DOT - 5 Panel	8 per month	x	36.00	=	288.00
,	el 8 per month	x	36.00	=	288.00
,	-	x	29.00	=	116.00
CONFIRMATION TEST (DOT & NON-DOT)	4 per month	x	29.00	=	116.00
PHYSICALS GENERAL (DOT)	3 per month	x	70.00	=	210.00
, ,	3 per month	x	50.00	=	150.00
, ,	4 per month	x	50.00	=	200.00
TB TEST	5 per month	x	30.00	=	150.00
	DRUG DRAW & TESTING (URINE) - DOT - 5 Panel DRUG DRAW & TESTING (URINE) - NON-DOT - 10 Panel BREATH ALCOHOL DRAW & TEST (DOT & NON-DOT) CONFIRMATION TEST (DOT & NON-DOT) PHYSICALS GENERAL (DOT) PHYSICALS GENERAL (NON-DOT) MEDICAL REVIEW OFFICER	DIAGNOSTIC PROCEDURE DRUG DRAW & TESTING (URINE) - DOT - 5 Panel 8 per month DRUG DRAW & TESTING (URINE) - NON-DOT - 10 Panel 8 per month BREATH ALCOHOL DRAW & TEST (DOT & NON-DOT) 4 per month CONFIRMATION TEST (DOT & NON-DOT) 4 per month PHYSICALS GENERAL (DOT) 3 per month PHYSICALS GENERAL (NON-DOT) 3 per month MEDICAL REVIEW OFFICER 4 per month	DIAGNOSTIC PROCEDURE DRUG DRAW & TESTING (URINE) - DOT - 5 Panel 8 per month x DRUG DRAW & TESTING (URINE) - NON-DOT - 10 Panel 8 per month x BREATH ALCOHOL DRAW & TEST (DOT & NON-DOT) 4 per month x CONFIRMATION TEST (DOT & NON-DOT) 4 per month x PHYSICALS GENERAL (DOT) 3 per month x PHYSICALS GENERAL (NON-DOT) 3 per month x MEDICAL REVIEW OFFICER 4 per month x	DIAGNOSTIC PROCEDURE DIAGNOSTIC PROCEDURE REQUESTS DRUG DRAW & TESTING (URINE) - DOT - 5 Panel 8 per month x DRUG DRAW & TESTING (URINE) - NON-DOT - 10 Panel 8 per month x BREATH ALCOHOL DRAW & TEST (DOT & NON-DOT) 4 per month x CONFIRMATION TEST (DOT & NON-DOT) 4 per month x PHYSICALS GENERAL (DOT) 3 per month x PHYSICALS GENERAL (NON-DOT) 3 per month x MEDICAL REVIEW OFFICER 4 per month x 50.00	DIAGNOSTIC PROCEDURE REQUESTS DRUG DRAW & TESTING (URINE) - DOT - 5 Panel 8 per month x DRUG DRAW & TESTING (URINE) - NON-DOT - 10 Panel 8 per month x BREATH ALCOHOL DRAW & TEST (DOT & NON-DOT) 4 per month x CONFIRMATION TEST (DOT & NON-DOT) 4 per month x PHYSICALS GENERAL (DOT) 3 per month x PHYSICALS GENERAL (NON-DOT) 3 per month x MEDICAL REVIEW OFFICER 4 per month x SPECIFY PRICE PER TEST REQUEST TEST REQUEST SPECIFY PRICE PER TEST REQUEST TEST REQUEST 18

All prices and %'s must include all laboratory services and related fees, as well as all pick-up fees.

Bidder Na	ame EX	press Occu	pation	al V	redic	cine Clin	vi C
Address_	3120	Interna	tiona	LB	Ivol.		
	Brow	ensville,	TX	785	21		
((City/State/Zip						
Signature							
Telephon	e 956	504. 724	5]	Date	07.27	7.23

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Responder's Initials: BG

ANNUAL RFP #1475 - 1

MINIMUM REQUIREMENTS - LABORATORY SERVICES: DRUGS & ALCOHOL TESTING - COUNTY EMPLOYEES

(Prices must include all Laboratory Diagnostic Services and Fees)

RFP # 1475-1 Laboratory Services: Drug & Alcohol Testing Employees

ITEM #	DIAGNOSTIC PROCEDURE	ESTIMATED NUMBER OF <u>REQUESTS</u>		SPECIFY PRICE PER TEST REQUEST		TOTAL PRICE
09	ON-SITE SERVICE	2 per month	х		=	20.00
10	AFTER HOUR FEES (per procedure)	2 per month	x	50.00	=	100.00

If nothing is collected a fee will be applied of: \$ 30.00

MONTHLY GRAND TOTAL PRICE ALL

#1,638.00

CONSORTIUM (random) PROGRAM \$ YEARLY							
On all other miscellaneous (currently in your catalog) lab test, <u>not listed</u> , Cameron County will receive							
On all new (not in the catalog as yet) miscellaneous lab tests, not listed. Cameron County will receive % over your cost price.							
Charge per test 0.00 for random selection provided by County.							
All prices and %'s must include all laboratory services and related fees, as well as all pick-up fees.							
Bidder Express Occupational Medicine Clinic							
Address 3120 International Blvd							
Browns ville, Tx 78521 (City/State/Zip)							
Signature							
Telephone <u>956-504.7245</u> Date <u>07.27.23</u>							

ANNUAL RFP: LABORATORY SERVICES: DRUGS & ALCOHOL TESTING - COUNTY EMPLOYEES

MISCELLANEOUS LIST

On all other miscellaneous Drug & Alcohol Testing (Lab Services) County Employees items <u>not listed</u> Cameron County will be charged the following prices each <u>/ unit price</u>:

		COST
a.	Pulmonary Function Test (PF T)	\$ 45.00
b.	Audiometric Baseline Test	\$ 25.00
c.	1 View Chest X-Ray (with reading)	\$
d.	Functional Capacity Evaluation	\$ 100.00
e.	Hair Follicle Testing (5 Panel only)	\$ 85.00
f.	Glucometer Testing	\$_10.00
g.	Re-issued DOT medical cards	\$ 10.00
h.	Complete Blood Count (CBD)	\$_35.00
i.	PPD Vaccine	\$_30.00
j.	EKG cardiovascular exam	\$ 50.00
k.	Ethanol urine test	\$_29.00

CATALOG WITH LIST PRICES MUST ACCOMPANY ALL RFP's SUBMITTED.

Proposer	Express	Occupati	onal	Medici	re Clini	C
		nternation				
	Browns	ville, Ti				
(0	City/State/Zip	,				
Signature_	All	/				
Telephone	956-50	4.7245		Date	7.27.	23