

# **Spartanburg regional screening registration**

# About the screening

Date	Location	Registration deadline
May 9, 2024	Spartanburg Community College Health Sciences Building (Room 115) I-85 at New Cut Road Spartanburg, SC	May 6, 2024

This screening, worth more than \$300, is offered at no cost to employees, retirees, spouses, dependent children ages 19 and older, and COBRA subscribers whose primary coverage is the State Health Plan or MUSC Health Plan. Within three weeks after your screening, you will receive your results that highlight any values outside the normal range. We recommend scheduling an adult well visit after your screening to share your results with your network provider.

# What's included in the screening

- Lipid profile (total cholesterol, LDL, HDL and triglyceride).
- Chemistry profile (Blood Urea Nitrogen (BUN) and creatinine, glucose, electrolytes, chloride and bicarbonate).
- Hemogram (Red and white blood cell count, hemoglobin and hematocrit).
- Blood pressure, height and weight.

#### Registration

To register, email <u>ericwpatch@gmail.com</u> with "Spartanburg regional screening" in the subject line and:

- 1. Attach this completed form to the email; or
- 2. Include the information below in the body of the email.

Name:					
Work phone:			_ Home phone:		
Email:					
Requested appointment window:					
	7:30-9:00 a.m.	□ 9:00-10:30 a.m.	□ 10:30-11:30 a.m.		

You will receive your appointment time by email. If you have any questions, contact Carolina Occupational Health Screening Group at <a href="mailto:ericwpatch@gmail.com">ericwpatch@gmail.com</a> or 864.915.2015.

# **Terms and conditions**

- The preventive screening requires a 12-hour fasting prior to your appointment time; however, you may drink water during this 12-hour period. We encourage you to drink plenty of water prior to your screening, which helps with the blood draw.
- If you take medications, please continue to do so.
- Arrive as close to your designated appointment time as possible.
- Bring your insurance card with you to the screening. Your benefits identification number (BIN), which is on your insurance card, is required when filling out paperwork.
- The Plan allows for one preventive screening per calendar year (January to December).
- If Medicare or TRICARE is your primary insurance, you are not eligible to receive a screening at no cost.
- At your screening, you will have the option to send your screening results to BlueCross BlueShield of South Carolina to help you better manage your health.
- Appointment times are assigned on a first-come, first-served basis.

# **Optional tests**

Below is a list of the most popular optional tests and their prices. These tests can be requested and paid for the day of the screening. COHSG only accepts payment in the form of cash, check or money order.

- Thyroid: \$15
- CA-125: \$35
- Vitamin D, 25-Hydroxy: \$60
- Prostate-Specific Antigen (PSA): \$25
- Hemoglobin A1C: \$35
- Blood type: \$20
- C-Reactive Protein (CRP): \$20
- Homocysteine: \$45