OCCUPATIONAL
Care Services

	Service	Selection
Vital Signs And Physical Examination	•Blood Pressure and Heart Rate •Height, Weight, BMI Analysis •Personal Health & Family History Review	☐ ☐ ☐
Lab Tests	•Complete Blood Panel •HbA1C •Hepatitis A,B,C Screen(Antibody&Antigen) •Urinalysis •Cholesterol Panel •Inflammatory Markers •H. Pylori Antibody •Vitamin B12 •Hormone Level Testing •Folic Acid •Stool Test	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Imaging	•Chest X-Ray (In Clinic Only) •Ultrasound : Abdomen & Pelvis •Vascular Ultrasound	☐ ☐ ☐
Diagnostics	•Echocardiogram •Lung Function Test •Audiometry	☐ ☐ ☐
Eye Health Screening	•Visual Acuity •Color Vision •Vision Titmus Screening •Stereo Depth Screening	☐ ☐ ☐ ☐
Preventative Health	•Medical Consultation and Examination •Health Screening Evaluation Report •Complimentary Light Meal •Nutrition and Exercise Program •12 System Cancer Screening •24 System Cancer Screening •IV Infusion Therapy	☐ ☐ ☐ ☐ ☐ ☐