



Order Expiration Date / Time: _____

*You must give your specimen
before the Expiration Date / Time.***TPA Billing Information:**

SURSCAN
2030 G AVENUE # 1102
PLANO, TX 75074 Phone:
(972)633-1388 Fax:
(775)370-3031

Medical Review Officer:

Any prescriptions you may be taking **WILL NOT** be discussed at the time of collection. A Medical Review Officer will contact you at the number you provide on the chain of custody form at the time of testing.

Please bring your driver's license or other government issued photo-ID with you for identification at the collection facility.

Test Information**Account Information:****Test Details:**

Reason for Test: Random

Service(s) to be Performed

UA Drug Screening (Collection Only)

Test Panel:**Collection Site Information (Pick any site below)** *Call Collection Site You Pick To Confirm Hours*

You must bring this order confirmation to the collection facility!

Customer Service (972) 633-1388