

Healthcare Worker Medical Surveillance Fee Schedule

BASELINE EVALUATION

For those with direct patient/human subject contact or who enter patient care areas

Health/Medical History Questionnaire review	\$17.87
Tuberculosis Screening	
TB Questionnaire review	\$12.23
Tuberculosis screening Quantiferon blood test (QFT-G), each test	\$57.95
1 view CXR for positive TB screening test	\$102.87
2 view CXR for positive TB screening test	\$121.22
Mandatory medical evaluation for any positive TB screening test	\$43.27-\$99.60
MMRV Screening	
Measles (Rubeola) Titer	\$57.00
Mumps Titer	\$27.35
Rubella Titer	\$33.19
Varicella (Chicken Pox) Titer	\$25.30
MMR Vaccination, each	\$91.32
Varicella Vaccination, each	\$143.18
Additional Immunizations	
Tdap Vaccination (Tetanus, Diphtheria, Pertussis)	\$52.76
Flu Vaccination (no charge for Stanford University employees)	\$32.00
Procedural Charges	
Venipuncture and sampling processing*	\$18.55

For those at risk for exposure to blood or other potentially infectious material

To those at risk for exposure to blood of other potentially infectious material		
Hepatitis B Vaccination Declaration Form review	\$0.00	
Hepatitis B Vaccination (3 vaccine series), each vaccine	\$70.61	
Hepatitis B surface antibody (titer)	\$15.00	
Venipuncture and sample processing for titer*	\$18.55	
Cost summary for routine Hepatitis B series (#3 vaccinations + titer + venipuncture fee)	\$245.38	
Possible additional charges		
Hepatitis B surface antigen testing	\$15.00	
Hepatitis B core antibody testing	\$15.00	
Repeat Hepatitis B vaccination series, lab testing	as above	

For all staff members who are at risk for airborne infectious disease (AirIDs)

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Respirator Questionnaire review	\$17.87
Respirator Fit Testing	\$29.20
Respirator Clinical Exam (if indicated)	\$43.27-\$99.60
Pulmonary Function Test (if indicated)	\$25.40

^{*} A separate fee for venipuncture and sample processing will be added in the event of any required venipuncture during a single employee visit (one single fee covers multiple samples that may be drawn concurrently)



Healthcare Worker Medical Surveillance Fee Schedule

ANNUAL SURVEILLANCE

For those with direct patient/human subject contact or who enter patient care areas

To those with direct patient number subject contact of who effer patient care areas		
Health/Medical History Questionnaire review	\$17.87	
<u>Tuberculosis Screening</u>		
TB Questionnaire review	\$12.23	
Tuberculosis screening Quantiferon blood test (QFT-G), each test	\$57.95	
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Procedural Charges		
Venipuncture and sampling processing*	\$18.55	

For all staff members who are at risk for airborne infectious disease (AirIDs)

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Respirator Fit Testing	\$29.20
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