SERVICES AND BENEFITS APPENDIX I

- Medical Care
 - EKG (Two per year)
 - Pulmonary Function Test (Spirometry)
 - Urinalysis
 - o Blood sugar
 - o Fecal occult blood test
 - o PPD (skin test for tuberculosis one per year)
 - Flu Vaccine (One per year)
 - o Tetanus vaccine
 - o Vascular Studies (Venous, carotid, peripheral duplex scans)
- Gynecological Care
 - o Pap smear (One per year)
 - o Family Planning
- Pediatrics
 - o Childhood immunization (Cost of Immunization is an additional charge)
 - Audiometry
- Lab Test (blood, urine, stool), see appendix V for details (twice a year for each test)
- Imaging: x-rays (three per year), sonograms (two per year) mammogram (one every other year)
- Referral for discounted colonoscopy and upper endoscopy