

# Drug Testing

Applicants are required to obtain a drug screen. You are not required to use one of the facilities on the list.

If a laboratory requires results to be sent directly to the institution, please send to:

Ursuline College  
Graduate Admission  
2550 Lander Road  
Pepper Pike, OH 44124  
graduateadmissions@ursuline.edu

## **Quest Diagnostics (Quest Health)**

- Website: <https://www.questhealth.com/how-it-works.html>
- Follow instructions online
- Be sure to PAY BEFORE appointment as this creates the registration for the test (if an appointment is scheduled without paying, you will be turned away)

## **Third Party Affiliate: Sure Screen Labs**

- Website: [www.surescreenlabs.com](http://www.surescreenlabs.com)
- Partners with popular lab company LabCorp
- Complete the provided form with payment and return (email/scan) per form's instructions. You will receive a registration number to take to LabCorp for your test. Results will be sent to Ursuline College Graduate Admission.

## **Third Party Affiliate: Accredited Drug Testing**

- Website: <https://accrediteddrugtesting.com/>
- Partners with popular lab companies such as LabCorp and Quest Diagnostics
- Scroll down main webpage to blue box labeled "Urine." Click "Schedule Now." Click "Urine Drug Testing Options." Choose 10-panel (online discount) or 10-panel drug test with Background check. Proceed to registration.
- If assistance is needed, call: 1-800-221-4291 (let them know that it is for Ursuline College)



**Make  
Your World  
More**



To schedule your DRUG TEST or TITERS, please email or fax this completed form to:

FAX: 803-256-9405

Email: [columbia@surescreenlabs.com](mailto:columbia@surescreenlabs.com)

*Remember, you can take a picture of this completed form with your smartphone and email it from your phone!*

**STUDENT INSTRUCTIONS: DO NOT TAKE THIS FORM TO LAB CORP**

Once we receive this completed form, your card will be charged and a registration # will be emailed to the email address you provide within 48 hours. If you have not received the email in 48 hours of sending in this form, please contact us at 803-256-9535 (*Please check your junk folder first*). Your registration email should be taken, along with a **PICTURE ID**, to the nearest Lab Corp patient service center. If you have any questions or need your registration updated, please call 803-256-9535.

SCHOOL NAME: Self Pay, HB Ursuline College

STUDENT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

YOUR ZIP CODE: \_\_\_\_\_

☐

Varicella Titer  
(\$50.00)

☐

QuantiFERON (TB Test)  
(\$125.00)

☐

MMR Titer  
(\$75.00)

☐

10 Panel Drug Test (726950, prof 14)  
(\$55.00)

☐

Hepatitis B Titer  
(\$50.00)

☐

TDAP Titer (163253 & 161745)  
(\$135.00)

**CREDIT, DEBIT / PREPAID CARD (Visa or MasterCard Only) PLEASE WRITE NEATLY**

NUMBER: \_\_\_\_\_ EXP DATE: \_\_\_\_\_ 3 DIGIT SEC CODE: \_\_\_\_\_

COMPLETE BILLING ADDRESS for CARD : \_\_\_\_\_

AMOUNT TO CHARGE: \$ \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
(Card Holder's Signature is Required) \*All Sales Final\*

Would you like the credit card receipt emailed? (Indicate YES or NO): \_\_\_\_\_

Card Holder email address if different than student's email: \_\_\_\_\_

I hereby authorize SureScreen Labs to release my drug test and/or titer results to Ursuline College and its designated representatives: [graduateadmissions@ursuline.edu](mailto:graduateadmissions@ursuline.edu). In the event of a positive drug test, the student can request a Medical Review. Per that request, our physician will call the student to review any prescriptions and provide a final result based on their findings. The fee for this service is \$75.00. To initiate the request, the student should email us at [columbia@surescreenlabs.com](mailto:columbia@surescreenlabs.com), provide their name and request their results are sent to Medical Review.

SIGNATURE: \_\_\_\_\_ (Required)