

**SIGNATURE PAGE**

**P-18-2026**

To the Monmouth County Board of County Commissioners:

**THE UNDERSIGNED HEREBY DECLARES THAT  
I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS.  
I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE  
WITH YOUR REQUIREMENTS.**

Company Name: Hackensack Meridian Team Health, P.C. dba HM Works  
(PRINT)

Preparer's Name: Nathalia Allen  
(PRINT)

Signature:   
(DATE)

Address: 2-12 Corbett Way, Suite 101  
Eatontown, NJ 07724

Telephone No.: 848-374-8427

Fax No.: 732 263-7902

E-Mail Address: Nathalia.Allen@hmhn.org  
**\*\*\* (This should be the email where Contracts would be sent) \*\*\***

Contact Person: Nathalia Allen

FEIN:   
(Federal Employee ID)

BRC:   
(Business Registration Certificate)

(Revised 2/2017)

# County of Monmouth

## REQUEST FOR BID

----- This Is Not An Order -----



RFB# P-18-2026

Monmouth County Purchasing

Hall of Records, 3rd Floor

1 East Main Street

Freehold, NJ 07728

(732) 431-7370 Fax (732) 431-7379

Contact: Theresa Aziz  
732-431-7370 x7371

### PERFORM PRE-EMPLOYMENT MEDICAL EXAMINATIONS AND ADDITIONAL MEDICAL TESTING SERVICES FOR VARIOUS MONMOUTH COUNTY DEPARTMENTS FOR THE PERIOD OF JANUARY 1, 2026 THROUGH DECEMBER 31, 2026

RFB must be received no later than:

For Delivery to: Human Resources/Personnel Department, Hall of Records  
1 East Main Street, First Floor, Freehold, NJ 07728

Delivery Date: 1/1/2026 - 12/31/2026

| ITEM# | DESCRIPTION  | QUANTITY/UNIT | UNIT PRICE | TOTAL PRICE |
|-------|--|---------------|------------|-------------|
| 1     | MEDICAL EXAMINATION INCLUDING HEALTH HISTORY WITH OCCUPATIONAL FOCUS; VITALS, HEIGHT, WEIGHT, TEMP AND BLOOD PRESSURE; SNELLEN VISION  | 263 EACH      | \$81.00    | \$21,303.00 |
| 2     | MEDICAL EXAMINATION PER OSHA HAZWOPER STANDARD, INCLUDING OSHA RESPIRATOR QUESTIONNAIRE AND CLEARANCE, MEDICAL HISTORY WITH EMPHASIS ON SYMPTOMS RELATED TO HANDLING HAZARDOUS SUBSTANCES AND HEALTH HAZARDS; FITNESS FOR DUTY; SNELLEN VISION; SCRIPTS FOR SELF-ADMINISTRATION OF DUO NERVE AGENT AUTO INJECTORS                                  | 30 EACH       | \$106.00   | \$3,180.00  |
| 3     | DOT EXAM (W/CARD) PERFORMED ACCORDING TO DOT REGULATIONS; INCLUDES ISSUANCE OF MEDICAL CERTIFICATE<br><br>NOTE: DOT EXAM INCLUDES THE FOLLOWING (6/20): DOT EXAM (W/CARD), INCLUDING HEALTH HISTORY WITH OCCUPATIONAL FOCUS; VITALS, HEIGHT, WEIGHT, TEMP AND BLOOD PRESSURE; SNELLEN VISION; FORCED WHISPER; EPWORTH SLEEPINESS SCALE; URINALYSIS | 270 EACH      | \$86.00    | \$23,220.00 |
| 4     | AUDIOGRAM  | 330 EACH      | \$29.00    | \$9,570.00  |
| 5     | COMPREHENSIVE METABOLIC PANEL  | 234 EACH      | \$33.00    | \$7,722.00  |
| 6     | COMPLETE BLOOD COUNT   | 234 EACH      | \$23.00    | \$5,382.00  |

County of Monmouth

REQUEST FOR BID

----- This Is Not An Order -----



RFB# P-18-2026

Monmouth County Purchasing  
Hall of Records, 3rd Floor  
1 East Main Street  
Freehold, NJ 07728  
(732) 431-7370 Fax (732) 431-7379

Contact: Theresa Aziz  
732-431-7370 x7371

**PERFORM PRE-EMPLOYMENT MEDICAL EXAMINATIONS AND ADDITIONAL MEDICAL TESTING SERVICES FOR VARIOUS MONMOUTH COUNTY DEPARTMENTS FOR THE PERIOD OF JANUARY 1, 2026 THROUGH DECEMBER 31, 2026**

| ITEM# | DESCRIPTION   | QUANTITY/UNIT | UNIT PRICE | TOTAL PRICE |
|-------|---|---------------|------------|-------------|
| 7     | URINALYSIS  | 248 EACH      | \$21.00    | \$5,208.00  |
| 8     | CHEST X-RAY 2-VIEW  | 97 EACH       | \$79.00    | \$7,663.00  |
| 9     | CHEST X-RAY 2-VIEW (OPTIONAL FOR EMPLOYEES OVER 40 AT 5 YEAR INTERVALS); REQUIRED AT EXIT | 64 EACH       | \$79.00    | \$5,056.00  |
| 10    | DRUG SCREEN 10-PANEL W/ MRO   | 249 EACH      | \$53.00    | \$13,197.00 |
| 11    | EKG   | 127 EACH      | \$53.00    | \$6,731.00  |
| 12    | EKG (OPTIONAL FOR EMPLOYEES OVER 40 AT 5 YEAR INTERVALS)                                  | 104 EACH      | \$53.00    | \$5,512.00  |
| 13    | PULMONARY FUNCTION TEST   | 234 EACH      | \$53.00    | \$12,402.00 |
| 14    | LIPID PANEL   | 234 EACH      | \$33.00    | \$7,722.00  |
| 15    | OSHA RESPIRATOR QUESTIONNAIRE & CLEARANCE   | 314 EACH      | \$25.00    | \$7,850.00  |
| 16    | ISHIHARA TESTING (COLOR VISION)   | 262 EACH      | \$10.00    | \$2,620.00  |
| 17    | DOT DRUG SCREEN 5-PANEL W/ MRO  | 143 EACH      | \$53.00    | \$7,579.00  |

**County of Monmouth**

**REQUEST FOR BID**

----- This Is Not An Order -----



**RFB# P-18-2026**

**Monmouth County Purchasing**

**Hall of Records, 3rd Floor**

**1 East Main Street**

**Freehold, NJ 07728**

**(732) 431-7370 Fax (732) 431-7379**

**Contact:** Theresa Aziz  
732-431-7370 x7371

**PERFORM PRE-EMPLOYMENT MEDICAL EXAMINATIONS AND ADDITIONAL MEDICAL TESTING SERVICES FOR VARIOUS MONMOUTH COUNTY DEPARTMENTS FOR THE PERIOD OF JANUARY 1, 2026 THROUGH DECEMBER 31, 2026**

| ITEM# | DESCRIPTION  | QUANTITY/UNIT | UNIT PRICE   | TOTAL PRICE |
|-------|--|---------------|--|-------------|
| 18    | PPD & READING  | 124 EACH      | \$33.00  | \$4,092.00  |
| 19    | PPD ONSITE READING (COST PER HOUR)<br>\$_.00/HOUR/TEAM MEMBER FOR ONSITE PPD<br>RELATED SERVICES | 10 HOUR(S)    | \$63.00 per<br>hour/per HMTH<br>Team Member<br>on site | \$630.00    |
| 20    | BLOOD GLUCOSE  | 64 EACH       | \$20.00  | \$1,280.00  |
| 21    | CARDIAC TREADMILL STRESS TEST (AGE 45 AND<br>OVER IF MEDICALLY INDICATED)                        | 16 EACH       | \$339.00   | \$5,424.00  |
| 22    | HEPATITIS B VACCINATION SERIES OF 3; COST PER<br>SHOT  | 10 EACH       | \$68.00  | \$680.00    |
| 23    | HEPATITIS B ANTIBODY TITER   | 100 EACH      | \$51.00  | \$5,100.00  |
| 24    | URINE FOR CADMIUM  | 23 EACH       | \$47.00  | \$1,081.00  |
| 25    | URINE FOR HEAVY METAL SCREENING  | 8 EACH        | \$100.00   | \$800.00    |
| 26    | URINE FOR ARSENIC  | 23 EACH       | \$105.00   | \$2,415.00  |
| 27    | URINE FOR ZINC   | 23 EACH       | \$30.00  | \$690.00    |
| 28    | BLOOD TEST - LEAD LEVELS   | 15 EACH       | \$47.00  | \$705.00    |

**County of Monmouth**

**REQUEST FOR BID**

----- This Is Not An Order -----



**RFB# P-18-2026**

**Monmouth County Purchasing  
Hall of Records, 3rd Floor  
1 East Main Street  
Freehold, NJ 07728  
(732) 431-7370 Fax (732) 431-7379**

**Contact:** Theresa Aziz  
732-431-7370 x7371

**PERFORM PRE-EMPLOYMENT MEDICAL EXAMINATIONS AND ADDITIONAL MEDICAL TESTING SERVICES FOR VARIOUS MONMOUTH COUNTY DEPARTMENTS FOR THE PERIOD OF JANUARY 1, 2026 THROUGH DECEMBER 31, 2026**

| ITEM# | DESCRIPTION  | QUANTITY/UNIT | UNIT PRICE                               | TOTAL PRICE |
|-------|--|---------------|--|-------------|
| 29    | RESPIRATOR PHYSICIAN EXAMINATION - IF INDICATED PER OSHA RESPQ REVIEW FOR CLEARANCE  | 11 EACH       | \$81.00                                  | \$891.00    |
| 30    | PULMONARY FUNCTION TEST - IF INDICATED PER OSHA RESPQ REVIEW FOR CLEARANCE   | 11 EACH       | \$53.00                                  | \$583.00    |
| 31    | CBC W/ DIFFERENTIAL - IF INDICATED PER OSHA RESPQ REVIEW FOR CLEARANCE   | 11 EACH       | \$33.00                                  | \$363.00    |
| 32    | CHEST X-RAY SINGLE - VIEW - IF INDICATED PER OSHA RESPQ REVIEW FOR CLEARANCE   | 11 EACH       | \$45.00                                  | \$495.00    |
| 33    | CHOLINESTERASE   | 8 EACH        | \$68.00                                  | \$544.00    |
| 34    | BIO-MONITORING MEASUREMENT OF SPECIFIC SUBSTANCES OR METABOLITES IN BLOOD OR URINE; TOTAL NOT TO EXCEED \$1,000 (PRICING IS DEPENDENT OF TESTING REQUIRED) |               | Pricing is Dependent on Testing Required | \$1,000.00  |
| 35    | LYME ANTIBODY TEST   | 9 EACH        | \$45.00                                  | \$405.00    |
| 36    | CONFIRMATION TESTING FOR POSITIVE LYME ANTIBODY TEST   | 20 EACH       | \$859.00                                 | \$17,180.00 |
| 37    | INSTANT PREGNANCY TEST   | 4 EACH        | \$25.00                                  | \$100.00    |
| 38    | WEST NILE VIRUS ANTIBODIES   | 1 ONLY        | \$60.00                                  | \$60.00     |
| 39    | COVID-19 TEST (REQUIRED PRIOR TO CARDIAC STRESS TEST)  | 8 EACH        | \$100.00                                 | \$800.00    |

**County of Monmouth**

**REQUEST FOR BID**

----- This Is Not An Order -----



**RFB# P-18-2026**

**Monmouth County Purchasing  
Hall of Records, 3rd Floor  
1 East Main Street  
Freehold, NJ 07728  
(732) 431-7370 Fax (732) 431-7379**

**Contact:** Theresa Aziz  
732-431-7370 x7371

**PERFORM PRE-EMPLOYMENT MEDICAL EXAMINATIONS AND ADDITIONAL MEDICAL TESTING SERVICES FOR VARIOUS MONMOUTH COUNTY DEPARTMENTS FOR THE PERIOD OF JANUARY 1, 2026 THROUGH DECEMBER 31, 2026**

| ITEM#         | DESCRIPTION  | QUANTITY/UNIT | UNIT PRICE                               | TOTAL PRICE                |
|---------------|--|---------------|--|----------------------------|
| 40            | AUDIOGRAM - IF INDICATED PER DOT FORCED WHISPER TEST   | 50 EACH       | \$29.00                                  | \$1,450.00                 |
| 41            | TUTMUS VISION TEST   | 50 EACH       | \$28.00                                  | \$1,400.00                 |
| 42            | ADDITIONAL MISCELLANEOUS TESTS AND REVIEWS   | 100 NTE\$     | Pricing is Dependent on Testing Required | \$100.00                   |
| 43            | 2-DOSE HEPATITIS B VACCINE<br>-HEPATITIS B VACCINE #1 \$ __.00<br>-HEPATITIS B VACCINE #2 \$ __.00<br>(2ND DOSE TO BE ADMINISTERED ONE MONTH AFTER THE FIRST DOSE) | 160 EACH      | Dose#1 \$140.00<br>Dose #2 \$140.00      | \$22,400.00<br>\$22,400.00 |
| 44            | POPE TEST WITH CAPACITY  | 100 EACH      | \$275.00                                 | 27,500.00                  |
| 45            | POPE TEST - STANDARD   | 50 EACH       | \$200.00                                 | \$10,000.00                |
| <b>TOTAL:</b> |  |               | <b>\$282,485.00</b>                      |                            |