



1205 Monument Rd. Suite 203
Jacksonville, Florida 32225
Phone: 904-727-5120 Fax: 904-727-5129
Hours: Mon-Thur 8am-5pm, Fri 8am-4pm
Closed for Lunch 12:30-1:30pm

ONLINE Scheduling at: www.memorialoccmecine.com

Authorization for Examination

Authorization To Treat:	Date of Birth:
(Please Print Name of Employee)	

(Please Print Contact Person/Title Authorizing Treatment)

- Physical Examination – Non DOT
- DOT Physical
- Drug Screen Collection: __DOT__ Non-DOT __Instant__ Other:
- Breath Alcohol Test (BAT): __DOT__ Non-DOT
- Pulmonary Function Test (PFT)
- OSHA Respirator Medical Evaluation Questionnaire & Exam
- Respirator Fit Test
- Audiogram
- X-Ray (please explain)
- Workers Compensation
- Vaccination (Flu, Hep A/B, Varicella, Tetanus)
- Other

Authorized Signature:

Employer Name:

Phone Number:

Fax:

Date: