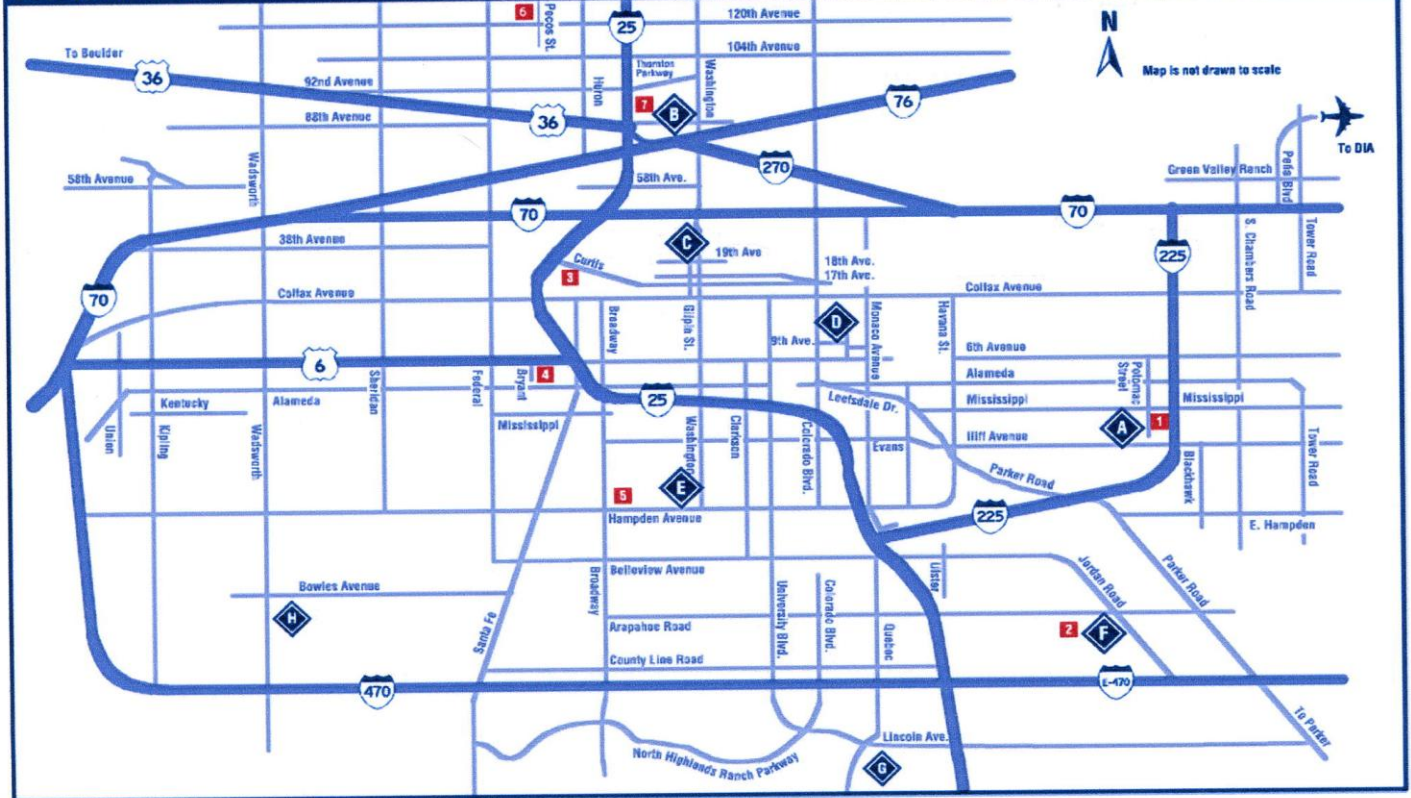


Denver Metro Area



HealthONE Occupational Medicine and Rehabilitation

- | | | | |
|---|--|--|--|
| <p>1 AURORA
1444 S Potomac St, #200
Aurora, CO 80012
P) 303-214-0000 F) 303-343-8135</p> | <p>3 DENVER*
1515 Wazee, Ste D
Denver, CO 80202
P) 303-534-9550 F) 720-932-7805</p> | <p>5 ENGLEWOOD
125 E Hampden Ave
Englewood, CO 80113
P) 303-788-9292 F) 303-788-9260</p> | <p>7 THORNTON
9195 Grant St, Ste 100
Thornton, CO 80229
P) 303-292-0034 F) 303-292-0097</p> |
| <p>2 CENTENNIAL
14000 E Arapahoe Rd, #110
Centennial, CO 80112
P) 303-218-4250 F) 303-218-4247</p> | <p>4 DENVER
120 Bryant St
Denver, CO 80219
P) 303-936-9700 F) 303-936-9686</p> | <p>6 WESTMINSTER
12207 Pecos St, #300
Westminster, CO 80234
P) 303-650-0445 F) 303-429-5088</p> | |



MEDICAL SERVICES AUTHORIZATION

Employer Univ CO/College of Nursing (DF# 15848) Date
Address 13120 E 19th Ave, Box C288-05 Phone Number (303)724-1381
Division Supervisor's Name Allison Moravec-Rice
Patient's Name Patient's Dept/Region

EMPLOYMENT PHYSICALS

- checkbox D.O.T
checkbox Post Offer
checkbox Back Assessment
checkbox Respirator Physical
checkbox Hazmat Physical
checkbox Guard Physical
checkbox PFT
checkbox X-Ray
checkbox Other
checkbox Patient Pays-Physical only
checkbox Company Pays

DRUG SCREENS/ALCOHOL TESTS

- checkbox NIDA
X SAM 5 (DS5, 5 panel drug screen)
checkbox SAM 9 (DS9, 9 panel drug screen)
checkbox Collection Only
checkbox EBT Breathalyzer
checkbox Post-Offer
checkbox Random
checkbox Post-Accident
checkbox Reasonable Suspicion
X Other: Pre-requisite for rotations

MEDICAL TREATMENT

On the Job Injury? checkbox Yes checkbox No
Date of Injury
Area of Body Injured
Post-Accident Drug Screen? checkbox Yes checkbox No
Breathalyzer? checkbox Yes checkbox No
Comments

Authorized By: Amy O. Bauer Title: Associate Dean for Clinical Affairs