



AUTHORIZATION FOR OCCUPATIONAL HEALTH SERVICES



ALL services included in account profile for respective service WILL be performed unless otherwise stated.

Company Name _____ Location _____
Employee or Prospective Employee Name _____
Company representative authorizing service _____ Phone _____
Signature of authorization _____ Date _____

By signing this authorization, the said employer acknowledges full responsibility for payment for ALL services related to examinations, screening, diagnostic testing and treatment and or medications deemed necessary by the treating Physician for the authorized individual named in this form unless it is previously requested to collect payment at time of service from the individual. It is understood that services will be paid in full upon receipt of billing for all amounts due. It is also understood that the employer will be responsible for payment of all services related to injury or illness care of the employee if said case is determined work related or not. or if the claim is denied by the workers' compensation insurance carrier.

Occupational Screening Facility and Training Centers

DEARBORN
23455 Michigan Ave
Dearborn, MI 48124
Tel: 313-438-6094
Fax: 313-438-6132
Mon-Fri 8AM-9PM
Sat-Sun 9AM-9PM
Holidays 9AM-5PM

Garden City
31450 Ford Road
Garden City, MI 48135 Tel: 734-333-8001 Fax: 734-333-8002
Mon-Fri 8AM-9PM
Weekends & Holidays 9AM-5PM

OccMed Connect
TAYLOR
10155 Telegraph Rd
Taylor, MI. 48180
Mon-Fri 9AM-5PM
OPENING IN MID OCTOBER

WORK RELATED INJURY/ILLNESS TREATMENT:

- Drug Screen
Breath Alcohol Testing

PHYSICAL EXAMINATIONS:

- Pre-Placement Exam
Return to Work Exam
Fit for Duty Exam
DOT Exam
Hazard Material/Surveillance Exam
Initial/Baseline
Annual/Periodic
Respirator Exam
Audiogram
Firefighter Physical
MCOLES Physical
Chest X-ray with B-Read
OTHER

DRUG AND ALCOHOL SCREENING:

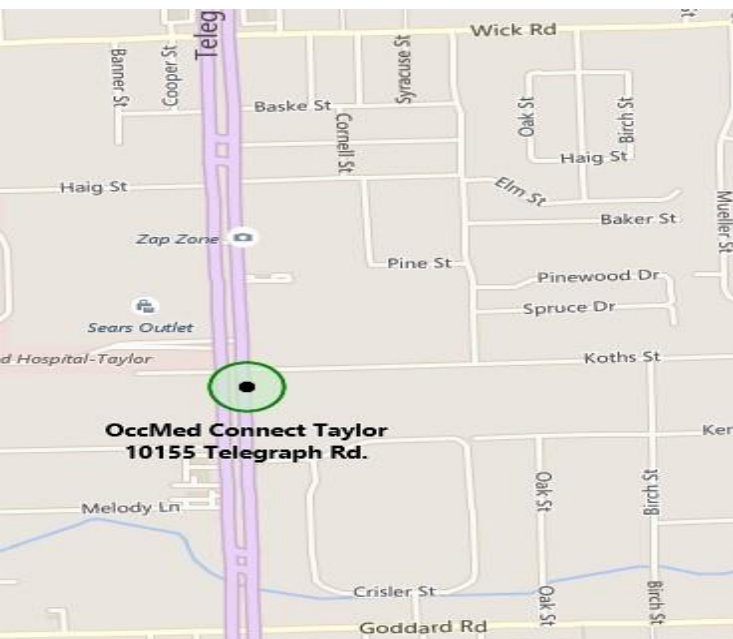
- Regulated Drug Screen
Non-Regulated Drug Screen
INSTANT Non-Regulated UDS
ESCREEN E-Cup
Collection Only Urine Drug Screen (employer must provide CCF)
MUST Drug Screen
Breath Alcohol Testing
Hair Collection
Nicotine Instant Screening
Reason for test
Pre-Placement
Random
Reasonable Suspicion
Follow-Up
Return to duty

VACCINATIONS AND LABORATORY SERVICES:

- PPD
PPD 2 Step
TDAP
Hepatitis B Series
Titers
Urinalysis
Glucose Testing
EKG
Other

OSHA COMPLIANT SERVICES:

- OSHA Resp. Questionnaire
Pulmonary Function Test
Respirator Fit Test
PHYSICAL EXAMINATIONS by Appointment in TAYLOR ONLY:
DOT Exam
Pre-Placement Exam



Onsite Training Center for CPR, DOT, HIPAA and OSHA mandated compliance

Occupational Services and Training Classes are available Onsite or at our Training Centers.

ONSITE and After Hour Drug Screen Collections

or for any questions and information 24/7

(734) 718-1969

CPR, FIRST AID, AED (ACLS, BLS)

Bloodborne Pathogen

DOT Drug and Alcohol

Supervisory Training

HIPAA Compliance and More!

Or visit us on the web at

www.occmedconnect.com

www.firstchoiceucc.com

Email - info@occmedconnect.com

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