

Occupational Medicine Authorization for Treatment of Examination

Dationt Names			Casial Casumitu	, Niconala aus	
Patient Name: Employer:					
Street Address:					
City, State, Zip:			Account # (optional):_		
	Minors must	be accompanied	by Parent or Legal G	uardian	
Work-related Injury or Illness Injury Illness			Drug / Alcohol Screening No Appointment Needed		
liljury	iiiiess				
Date of Injury: Workers' Comp. Ins: Policy No.:			drug screens and Brea between the hours of the DOT Guidelines 40		y be performed may adhere to
Policy Effective Dates:				equired for the drug screetate tate or local government	
Drug Screen with Work Injury Yes No Body Part Injured:			ID from your employer. If no ID an Employer Respresentative must be present to identify individual. Department of Transportation 49CFR 40.61		
Regrettably we are unable to see any injuries without Workers' Compensation Insurance. Workers' Compensation laws prohibits billing employers that are not self-insured for work injuries.			DOT UDS	DOT BAT	E Passport
			Non DOT UDS	Non DOT BAT	Q Passport
,u.r.cor			Lab name:		
Physical Examinations			Lab Acct. #:		
By Appointment Only			Designated Employe	er Representative:	
Preplacement Physical	Asbe	stos Physical			
Resporator Examination	Dust	Mask			
Hazardous Materials	Lead Examination		Phone (8 a.m. to 5 p.m.):		
DMV Examination	Fitne	ss for Duty	Phone (5 a.m. to 8 p	o.m.):	
<u>BI</u>	lood Work				
QuantiFERON-TB Gold	MMR Titer	Hepatitis B Titer	Reason fo Drug Scre	een:	
Hepatitis A Titer	Blood Lead	Other	Preplacement	Random	
Inje	ctions		Post-accident	Reasonab	ole Suspicion
PPD Hepatitis B	Hepatitis A	Flu Shot	Follow-up	Return to	Duty
Tetanus/Diphtheria (Td)	Tetanus/Diphtheria/Pertussis(Tdap)		Other Services		
			Audiogram		
			List Service		
Due to the nature of these area. Please alert your emp accompanying them to the	oloyee so that th	hey can make arra			
Comments:					
Authorized by (Drint Name)				Title	
Authorized by (Print Name): Authorized by (Signature):			Title: Date:		
Phone Number (Required):_				:	



CHULA VISTA

525 Third Ave.

Chula Vista, CA 91910 (2nd Floor)

Phone: 619-585-4050 Fax: 619-585-4054 Supervisor:

Debbie Flores

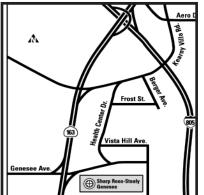
Hours: Monday to Friday,

8 a.m. to 5 p.m. Urgent Care: Daily, 8 a.m. to 8 p.m.

After-hours drug testing see Downtown location.

Email this form to:

ChulaVista.OccupationalMedicine@sharp.com



GENESEE

2020 Genesee Ave.

San Diego, CA 92123 (2nd Floor)

Phone: 858-616-8400 Fax: 858-616-8420 Supervisor:

Cathy Simmerman Hours: Monday to Friday,

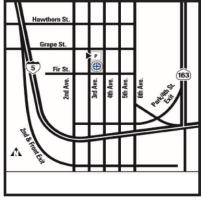
8 a.m. to 5 p.m.

After-hours drug testing see Downtown location.



Email this form to:

Genesee.OccupationalMedicine@sharp.com



DOWNTOWN

300 Fir Street

San Diego, CA 92101 (2nd Floor)

Phone: 619-446-1524 Fax: 619-234-9160 Supervisor: Charleena Days

Hours: Monday to Friday,

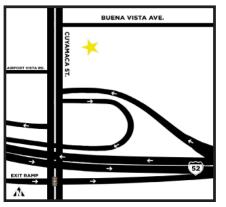
8 a.m. to 5 p.m. Urgent Care: Daily, 8 a.m. to 8 p.m.

After-hours drug screening for post accident and for

Monday to Friday, 5 to 8 p.m. Saturday and Sunday, 8 a.m. to 8 p.m.

Email this form to:

Downtown.OccupationalMedicine@sharp.com



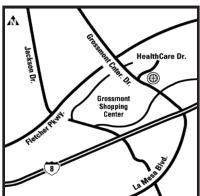
After-Hours Care SANTEE

8701 Cuyamaca St. Santee, CA 92071

Work Injuries Only in our Urgent Care

Monday to Friday, 5 to 8 p.m. Sunday and Saturday, 8 a.m. to 8 p.m. For other Occupational Health Services, please visit La

After-hours drug testing see Rancho Bernardo or Downtown locations.



Email this form to:

LaMesa.OccupationalMedicine@sharp.com



SORRENTO MESA

10243 Genetic Center Dr. San Diego, CA 92121 (1st Floor)

Phone: 858-526-6150 Fax: 858-526-6153

Supervisor:

LA MESA

Supervisor:

locations

5525 Grossmont Center Dr.

Phone: 619-644-6600

Hours: Monday to Friday,

After-hours drug testing see

Downtown or Rancho Bernardo

Fax: 619-644-6642

Jacqueline Hollins

8 a.m. to 5 p.m.

La Mesa, CA 91942 (6th Floor)

Michelle Radagio-Guzman Hours: Monday to Friday,

8 a.m. to 5 p.m. Urgent Care: Daily, 8 a.m. to 8 p.m.

After-hours drug testing see Ranch Bernardo location.

Email this form to:

SorrentoMesa.OccupationalMedicine@sharp.com



RANCHO BERNARDO

16899 West Bernardo Dr. San Diego, CA 92127 (3rd Floor)

Phone: 858-521-2350 Fax: 858-521-2354 **Supervisor:** Jacqueline Hollins Hours: Monday to Friday,

8 a.m. to 5 p.m. **Urgent Care:** Daily, 8 a.m. to 8 p.m.

After-hours drug screening for post accident and for

Monday to Friday, 5 to 8 p.m.

Saturday and Sunday, 8 a.m. to 8 p.m.

Email this form to:

Rancho Bernardo. Occupational Medicine@sharp.com

NOTE: Urgent Care Centers only offers work injury/illness treatment after 5 p.m. weekdays, 8am-8pm weekends/holidays.