AUTHORIZATION TO TREAT

HEALTH + FIRST Medical Group

INJURIES
24 Hours
7 Days a Week

HEALTHFIRST MEDICAL - **SOUTH**
13440 E. Imperial Hwy., Santa Fe Springs, CA 90670 • **(562) 926-3440**

❑ **Initial Injury** ❑ **Drug Screen on Injury** **Body Part Injured** _____

Physicals/Drug Screens 7:00 am - 4:30 pm
Picture I.D. Required!

❑ Post Offer Physical	❑ Drivers DOT Physical	❑ Hepatitis B Injection
❑ Return to Work Physical	❑ Federal Drug Screen	❑ Pulmonary Function Test
❑ Drug Screen	❑ Breath Alcohol Test	❑ Other

Patient Name: _____

Company Name: _____

Job Classification: _____

Modified Duty Available: Yes No

Insurance Name: _____

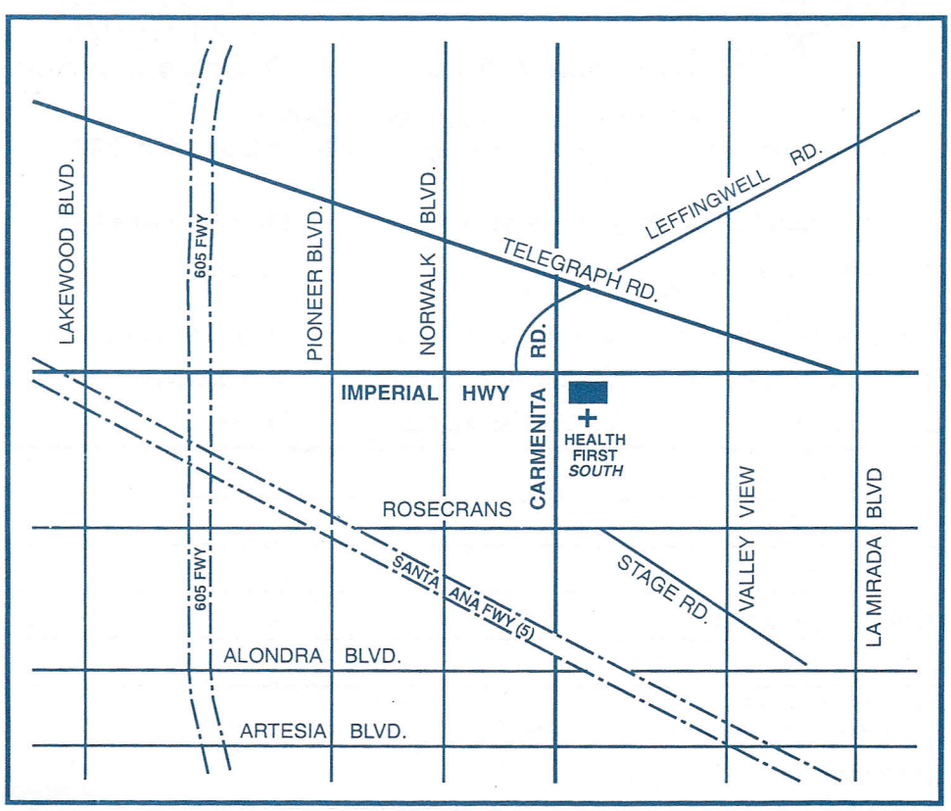
Does employee work for
Temp/Leasing Co. ❑ YES ❑ NO **Tel. #** _____

TODAYS DATE: _____

EXPIRES ON: _____

❑ VERBAL

_____
AUTHORIZED COMPANY SIGNATURE

SEE MAP ON OPPOSITE SIDE

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