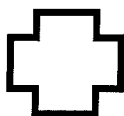
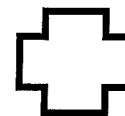


I.V. OCCUPATIONAL MEDICINE
1850 W. MAIN ST STE E. EL CENTRO, CA 92243
P: (760) 370-0020 F: (760) 370-0220



TREATMENT AUTHORIZATION



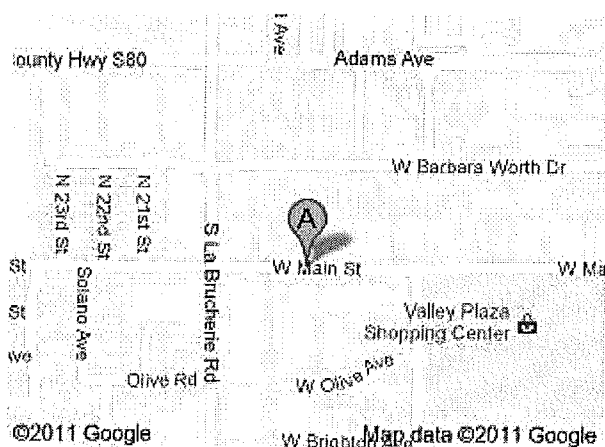
SERVICE SITE:

I.V. OCCUPATIONAL MEDICINE

1850 W. MAIN ST STE E. EL CENTRO, CA 92243
P: (760) 370-0020 F: (760) 370-0220

EMERGENCIES OR AFTER HOURS:

LIFE THREATING CALL 911 OR GO TO
EL CENTRO REGIONAL MEDICAL CENTER
1415 ROSS AVE EL CENTRO, CA 92243
P: (760) 339-7100



HOURS OF OPERATION: MONDAY- FRIDAY 8:30AM TO 5:00PM

CLIENT INFORMATION

EMPLOYEE NAME

COMPANY NAME

PHONE#

FAX#

SERVICES REQUESTED:

- Medical service date of injury _____
- Instant urine drug screen
- PFT (Respiratory test)
- DMV Physical
- Pre- Employment Physical
- Other _____

EMPLOYER AUTHORIZING SIGNATURE

PRINT NAME AND TITLE

DATE