

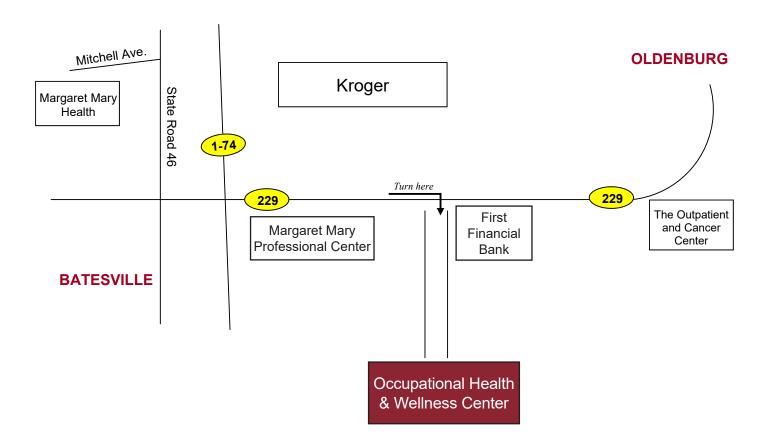
P.O. Box 226 • 321 Mitchell Avenue Batesville, IN 47006 Phone: 812.934.6624

Patient Label	
Patient Label	

AUTHORIZATION FOR SERVICES

Company Name:	Company Phone:	
Designated Employee Representative (Please print):		
Alternate Contact (Please print):		
Designee Phone:		
Employee Name:	Social Security Number:	
Job Title:	_ Department:	
Injury		
Type of Injury:		
Date Injury Occurred:	_ Time Injury Occurred:	_ AM/PM
Physicals		
☐ New Hire Exam	☐ DOT/CDL Exam	
☐ Return to Work Exam	☐ Chauffeur Exam	
☐ Respirator Clearance Exam	☐ PIV (Powered Industrial Vehicle) Exam	
□ Other:		
Other Services		
☐ Vaccine:	_	
☐ Titer (Immune Status Check):	_ ☐ Audiogram	
Other:	_ O Baseline O Annual O Retest	
Substance Abuse Test Requested (Photo ID Required)	Purpose of Test (Photo ID Required)	
☐ Regulated (DOT) ☐ Non-Regulated	Reasonable Suspicion/Just Cause	
☐ Urine Drug Screen	☐ Random	
☐ Breath Alcohol Test	☐ Random - Rehab Program	
☐ Breath Test and Urine Drug Screen	☐ Post Accident	
	☐ New Hire	
	Othor:	

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Hours of Operation

Monday - Thursday 8 AM - 5 PM

Friday 8 AM - 3:30 PM

Closed daily from 12 to 12: 30 PM. After-hours care is available in the Margaret Mary Health Emergency Services Department.

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