



Hendricks
Regional Health

AT WORK

AUTHORIZATION FOR SERVICES

Plainfield Occupational Health Center

1100 Southfield Drive, Suite 1310

Plainfield, IN 46168

P | (317) 839-6200 F | (317) 837-5500

Appointments & Walk In's 8 AM - 4:30 PM

To: Hendricks Regional Health Occupational Health Center Staff

From: (Company): _____

Re: (Employee): _____

Date and Time: _____

Signature: _____

(This form authorizes a Hendricks Regional Health Occupational Health Center provider to offer the following medical services.)

Authorization Contact

(Printed Name) _____

Workers' Compensation Injury Care

Yes

No

Description of Physical Injury: _____

Urine Drug Screen

Yes

No

DOT

Non-DOT

Reason for Testing

Pre-Employment

Post Accident

Random

Reasonable Suspicion

Alcohol Testing

Yes

No

DOT

Non-DOT

Physical Examination

DOT/CDL

Non-DOT Exam

Return to Work

Diagnostic Testing

Audiometry

EKG

TB/PPD

Hepatitis B

Other Screenings/Testing (Please Specify): _____

Map of Occupational Health Services

