

Gulf Regional Occupational Medicine Center

Baton Rouge Location:
 8742 Goodwood Blvd.
 Baton Rouge, LA 70806
 Phone #: 225-231-7070
 Fax #: 225-231-7069

Abbeville Location:
 121 East St. Victor St
 Abbeville, LA 70510
 Phone #: 337-893-0810
 Fax #: 337-893-0890

OCCUPATIONAL PHYSICAL EXAMINATION

Name: _____ S.S.#: _____ - _____ - _____ Date: _____

	N	ABN
General		
Skin		
HEENT		
Chest		
Heart		
Abdomen		
Anus/Rectum		
Genitals		
Extremities		
Neurological		
Back		
Other		

HT _____ **WT** _____ **BP** _____ **P** _____ **TEMP** _____ **FRAME** L M S

VISION: Uncorrected Corrected **Color Vision:** nor / abn **Ishihara** / 8

	Far	Near	Far	Near
Right	20/	20/	20/	20/
Left	20/	20/	20/	20/

Depth perception / nor / abn

Peripheral R _____ L _____

LABORATORY: 1. Urinalysis-SpGr ___ Alb ___ Glu ___ Bld ___ Nitrate ___ Micro ___

2. Circle tests performed (see attached reports) **AUDIOGRAM** **SPIROMETRY** **BLOOD TESTS**

3. Chest x-ray- _____

4. Other: _____

COMMENTS: _____

1. ___ Employable- no accommodations 2. ___ Employable- no accommodations pending drug screen/ back x-rays/ laboratory
3. ___ Employable with accommodations Qualified for respirator / SCBA Hearing protection required
4. ___ Medical hold 5. ___ Does NOT meet job requirements even with accommodations

I authorize the release of this information to the company

SIGNATURE OF APPLICANT

PHYSICIAN / P.A.