SUNBELT CONTROLS

Appendix 33-A
Occupational Medical Facility Evaluation Checklist

Name of Facility: _____ **Date:** ____/____/____

Location(s): _____

STAFFING

☐ Physician (M.D.) Available On-Site ☐ **Occupational Medicine:** ☐ Physical / Occupational Therapist

☐ **Additional Disciplines:**

☐ Psychiatry ☐ Radiology ☐ Orthopedics

☐ Toxicology ☐ Dermatology

FACILITIES / SERVICES

Distance from job site to medical facility is _____ **miles**

☐ Facilities are modern and well equipped ☐ **Hours of Service:** _____

☐ 24-hour back-up coverage is provided ☐ Physician is on duty at all times

Other available on-site services include:

☐ Emergency Treatment ☐ Drug Testing & Collection ☐ Drug Testing MRO Arrangement

☐ Pre-employment Screening ☐ Drug Testing Analysis ☐ Training Programs

☐ Laboratory Analysis ☐ Physical Occupational Therapy ☐ All equipment is maintained and calibrated according to state and federal regulations

☐ Audiology ☐ MRI ☐ X-Ray

☐ Job descriptions are requested and evaluated in the screening process

Special examinations can be obtained for:

☐ Insurance ☐ Disabled Worker ☐ Other: _____

☐ Disability Evaluations ☐ Return-to-work Evaluation _____

OCCUPATIONAL MEDICINE HEALTH SERVICES

☐ Job Placement Examinations ☐ Executive Examinations

☐ Health Surveillance Examinations ☐ Periodic Examinations

ADDITIONAL PROVIDED SERVICES

☐ Prompt, personalized expert attention (Wait for treatment is no longer than 10-minutes; Emergency cases are taken immediately)

☐ Physicians will refer patients to Preferred Provider Organizations as directed by the insurance carrier

☐ Responsible Workers' Compensation reporting, plus same-day notification of the results to the employer

☐ A full report, including the employee's diagnosis, treatment and return-to-work status is relayed to the employer the day of the injury and after each visit thereafter

☐ Within five-days of treating any employee, the occupational medical facility will forward copies of the doctor's first report and any narrative to the employer

☐ Copies of those documents are also forwarded to the insurance carrier as required by law

☐ The facility files with the appropriate agency or commission any special reports or documents as required by local regulations

☐ The physician evaluates the availability of modified duty to facilitate returning the employee to work on the same day or as soon as he or she is ready

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OVERALL ATTITUDE

	YES	NO
The facility maintains a positive attitude towards providing prompt treatment	☐	☐
The facility maintains a positive attitude towards prompt information sharing	☐	☐
The facility maintains a positive attitude towards modified duty programs	☐	☐

ADDITIONAL COMMENTS & QUESTIONS FOR THE FACILITY

_____

_____

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