



**Employer's Authorization for Examination and/or Treatment**  
(Must Present Photo ID at Time of Service)

Patient Name: \_\_\_\_\_ SSN / ID # : \_\_\_\_\_

Company: City Wide Mechanical Order Expire Date: \_\_\_\_\_

Company Address: 2520 Marsh Ln. Carrollton, TX 75006 Co. Phone: 817-298-6500

Company Contact: Hugo Trevino / Safety Director Email: hugot@citywidemech.com

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Billing:**

- ☐ Employee To Pay At Time of Service  
☐ Employer (See Address Above)  
☐ Workers Compensation (Report injury to your Ins. Co.)  
Ins. Co: \_\_\_\_\_  
Policy #: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Claim #: \_\_\_\_\_

**Drug Testing Only:**

① Test:

- ☐ Urine Drug Test: ☐ DOT ☐ Non-DOT  
☐ Rapid Urine Drug Check ☐ eCup  
☐ Breath Alcohol Test  
☐ Hair Analysis

② Reason:

- ☐ Post Accident / Injury  
☐ Random Testing  
☐ Reasonable Suspicion

**Work Related / Injury Care:**

Date of Injury: \_\_\_\_\_

☐ Evaluate & Treat

☐ **LIGHT DUTY IS AVAILABLE**

**Pre-Employment Services:**

- ☐ Urine Drug Test: ☐ DOT ☐ Non-DOT  
☐ Rapid Urine Drug Check ☐ eCup  
☐ Breath Alcohol Test  
☐ Hair Analysis  
☐ Physicals: ☐ DOT ☐ DOT Re-Cert. ☐ Basic

☐ Physical Performance Evaluation  
(Please Provide Job Description)

(Items in this section may require a Basic Physical)

☐ Respirator Fit Testing:

☐ Qualitative

☐ Quantitative: Mask Type\*: \_\_\_\_\_

☐ Pulmonary Function Test (PFT) **\*(Required)**

☐ Audiogram - OSHA Conservation

☐ Blood Testing:

☐ CBC ☐ CMP ☐ LIPID

☐ ZPP ☐ Heavy Metal:

Blood Lead \_\_\_\_\_  
Mercury \_\_\_\_\_  
Arsenic \_\_\_\_\_  
Cadmium \_\_\_\_\_  
Chromium \_\_\_\_\_  
Specific \_\_\_\_\_

☐ TB Skin Test

☐ X-rays: ☐ Chest ☐ B-Read

☐ Vision Testing:

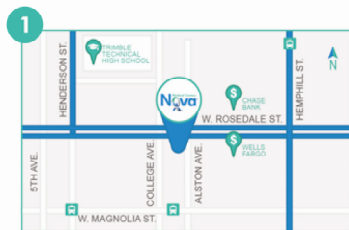
☐ Wall Chart ☐ J -2 ☐ Color (Ishihara)

☐ EKG

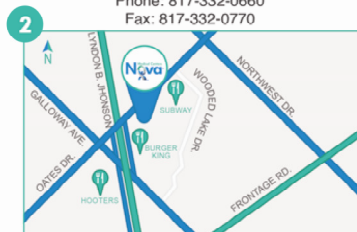
**Special**

**Instructions/Other Testing:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**CENTRAL FT. WORTH**  
1106 Alston Ave. Ste. 120  
Fort Worth, TX 76104  
Phone: 817-332-0660  
Fax: 817-332-0770



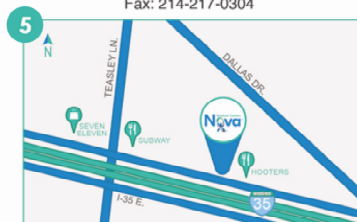
**MESQUITE**  
1900 Oates Dr. Ste. 100  
Mesquite, TX 75150  
Phone: 972-698-7700  
Fax: 972-698-7702



**NORTH FT. WORTH**  
3645 N. Beach St.  
Fort Worth, TX 76137  
Phone: 817-759-0004  
Fax: 817-759-0003



**DUNCANVILLE**  
814 E. Camp Wisdom Rd.  
Duncanville, TX 75116  
Phone: 214-217-0303  
Fax: 214-217-0304



**DENTON**  
725 S. I-35 E. Ste. 188  
Denton, TX 76205  
Phone: 940-222-3800  
Fax: 940-222-3801



**YOUR CHOICE FOR WORK  
INJURY TREATMENT**

#### OFFICE HOURS

Monday - Friday 8:30am - 6:00pm

If There Is A Major Medical Emergency

**PLEASE CALL 911**

After Hours  
Drug Testing  
1-866-480-1310  
option 2

After Hours  
Triage Hotline  
1-866-480-1310  
option 5

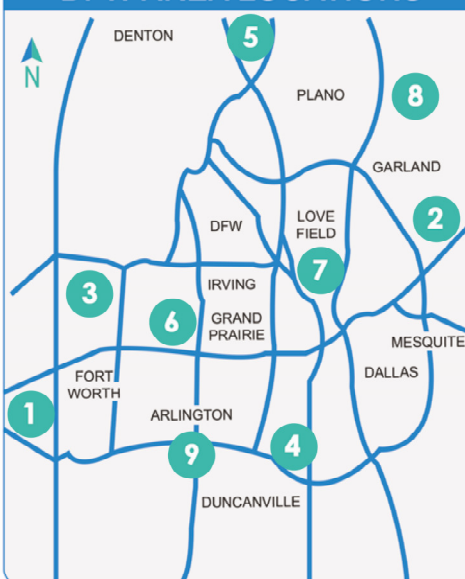
**FREE  
TRANSPORTATION**

**MINIMAL  
WAIT TIMES**

**WALK-INS  
WELCOME**

**NO APPOINTMENT  
NECESSARY**

#### DFW AREA LOCATIONS

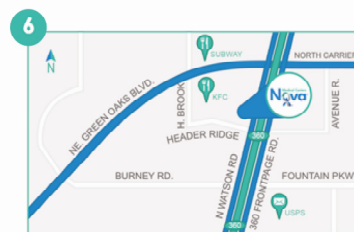


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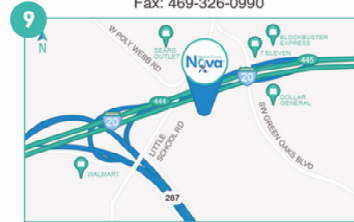
**GRAND PRAIRIE**  
2045 N. Hwy 360 Ste. 100B  
Grand Prairie, TX 75050  
Phone: 972-623-1111  
Fax: 972-623-1105



**LOVE FIELD**  
8267 Elmbrook Dr. Ste. 100  
Dallas, TX 75247  
Phone: 214-350-9800  
Fax: 214-350-9802



**PLANO**  
1111 Jupiter Rd. Ste. 100B  
Plano, TX 75074  
Phone: 469-326-0999  
Fax: 469-326-0990



**ARLINGTON**  
5900 I-20 W  
Arlington, TX 76017  
Phone: 682-226-6001  
Fax: 682-226-6002

**HOUSTON, TX**

11 LOCATIONS

**SAN ANTONIO, TX**

4 LOCATIONS

**AUSTIN, TX**

2 LOCATIONS

**MIDLAND / ODESSA, TX**

2 LOCATION

**BRYAN, TX**

1 LOCATION

**LUBBOCK, TX**

1 LOCATION

**CORPUS CHRISTI, TX**

1 LOCATION

**MCALLEN, TX**

1 LOCATION

**TYLER, TX**

1 LOCATION

**EL PASO, TX**

1 LOCATION

**HARLINGEN, TX**

1 LOCATION

**BROWNSVILLE, TX**

1 LOCATION

**WACO, TX**

1 LOCATION

**ATLANTA, GA**

2 LOCATIONS

**NORCROSS, GA**

1 LOCATION

**MARIETTA, GA**

1 LOCATION

**AUGUSTA, GA**

1 LOCATION

**SAVANNAH, GA**

1 LOCATION

**MEMPHIS, TN**

2 LOCATIONS

**CHATTANOOGA, TN**

1 LOCATION

**KNOXVILLE, TN**

1 LOCATION

**INDIANAPOLIS, IN**

1 LOCATION