

# PRE-PLACEMENT PROTOCOL SHEET

Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

**ITEM NUMBER:** 1136 HL

**CLASS TITLE:** Clerk (Heavy Lifting)

**COMMENTS:** This class may involve frequent heavy lifting over 25 pounds, combined with bending, and twisting.

**PACKAGE: GENERAL** (record results on General Pre-Placement Exam Data form) G

- \_\_\_\_\_ Height/Weight
- \_\_\_\_\_ Dipstick urinalysis for glucose, protein, and blood
- \_\_\_\_\_ Blood pressure, pulse rate, rhythm
- \_\_\_\_\_ Distance acuity: Corrected OU, OS, OD (Titmus)
- \_\_\_\_\_ Near vision: Corrected OU (Titmus)
- \_\_\_\_\_ Audiometry: Administered by CAOHC certified staff
- \_\_\_\_\_ Review of General Pre-Placement Questionnaire

**REQUIRED ADDITIONAL TESTING:**

\_\_\_\_\_ Physical Examination, Complete A43

**REFLEXIVE TESTING:**

**Clinical Findings:**

**Testing Required:**

Dipstick (+) for blood unless menses	▶ _____	Urinalysis, Complete	A63
Dipstick (+) for protein	▶ _____	Urinalysis, Complete	A63
Hand deformity or weakness	▶ _____	Jamar X 3, each hand	A34
Heart murmur: > grade II, diastolic, or radiates to neck or axilla	▶ _____	EKG	A23
Heart, abnormal rhythm on exam	▶ _____	EKG	A23
Vision/near < target #5 OU	▶ _____	Vision retest with near point card	A69
Wheezing on exam	▶ _____	Spirometry	A56

**Orthopedic Concerns:**

**Testing Required:**

Scoliosis	▶ _____	Spine x-ray, 2 view (standing thoracic AP/ standing lumbar AP)	A55
Spondylolisthesis	▶ _____	Lumbar x-ray, 2 view (standing AP/ standing lateral)	A37

NOTE: Standing views must be done without shoes

**Medication Concerns:****Testing Required:**

Butalbital (Fioricet) use in last 6 months, but denies use in last month	▶	_____ Butalbital (urine)	A91
Carisoprodol (Soma), use in last 6 months, but denies use in last month	▶	_____ Carisoprodol (urine)	A92
Hydrocodone (Vicodin) use in last 6 months, but denies use in last month	▶	_____ Hydrocodone (urine)	A87
Cyclobenzaprine (Flexeril), use in last 6 months, but denies use in last month	▶	_____ Cyclobenzaprine (urine)	A93
Oxycodone (Percocet) use in last 6 months, but denies use in last month	▶	_____ Oxycodone (urine)	A89
Tramadol (Ultram) use in last 6 months, but denies use in last month		_____ Tramadol (urine)	A90