

PRE-PLACEMENT PROTOCOL SHEET

Name: _____

SSN: _____ DOB: _____ Date: _____

Contractor: _____

ITEM NUMBER: 5065

CLASS TITLE: Ambulance Driver

COMMENTS: Frequent heavy lifting over 25 pounds. Driving. Must meet all DOT medical criteria to carry a commercial driver's certificate. Do not issue DMV Form MCSA-5875/5876 to applicant (send originals to OHP).

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

PACKAGE: DMV (record results on General Pre-Placement Exam Data and DMV forms) AD

- _____ Specific Gravity
- _____ Peripheral Vision
- _____ Distance acuity: Uncorrected OU, OS, OD (Titmus)
- _____ Color vision with Titmus signal light slide
- _____ Physical Exam: Complete
- _____ Review and completion of DMV Form MCSA-5875/5876 (do not issue to applicant)

REQUIRED ADDITIONAL TESTING:

- _____ Drug test (County 8-drug panel) after completion of Drug Test Notification Form A65
- _____ EKG A23

REFLEXIVE TESTING:

Clinical Findings:

Testing Required:

Dipstick (+) for blood unless menses	▶ _____	Urinalysis, Complete	A63
Dipstick (+) for glucose	▶ _____	Hemoglobin A1c	A29
Dipstick (+) for protein	▶ _____	Urinalysis, Complete	A63
Hand deformity or weakness	▶ _____	Jamar X 3, each hand	A34
Vision, near < target #5 OU	▶ _____	Vision retest with near point card	A69
Vision/Far, corrected >20/40 either eye	▶ _____	ETDRS wall chart	A68
Wheezing on exam	▶ _____	Spirometry	A56

(see second page)

Internal Medicine Concerns:**Testing Required:**

Alcohol Abuse, DUI, wet reckless, hangovers, eye-openers, or binge drinking (≥6 drinks) within the last 2 years	▶	_____ Blood Chemistry Panel	A03
	▶	_____ CBC with differential	A04
	▶	_____ HDL	A27
Diabetes	▶	_____ Hemoglobin A1c	A29
Diabetes, corrected far acuity OU >20/40 on ETDRS chart	▶	_____ Glucose, serum	A25
Thyroid, Rx or disease in last 2 years	▶	_____ TSH	A62

Orthopedic Concerns:**Testing Required:**

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

NOTE: Standing views must be done without shoes

Medication Concerns:**Testing Required:**

Amitriptyline (Elavil, Endep, Vanatrip) use in last 6 months, but denies use in last month	▶	_____ Amitriptyline (urine)	A74
Carisoprodol (Soma), use in last 6 months, but denies use in last month	▶	_____ Carisoprodol (urine)	A92
Cyclobenzaprine (Flexeril), use in last 6 months, but denies use in last month	▶	_____ Cyclobenzaprine (urine)	A93
Hydrocodone (Vicodin) use in last 6 months, but denies use in last month	▶	_____ Hydrocodone (urine)	A87
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