

PRE-PLACEMENT PROTOCOL SHEET

Name: _____

SSN: _____ DOB: _____ Date: _____

Contractor: _____

ITEM NUMBER: 5096

CLASS TITLE: Unit Support Assistant

COMMENTS: Provides housekeeping, patient transport and clerical non-patient care and non-skilled patient support services. Positions in this class may be required to perform moderate tasks, such as bending, stooping, and occasionally lifting of heavy objects. No driving.

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

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- _____ 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

REFLEXIVE TESTING:

As Needed Physical Examination: Perform a specific body system exam, if there is a current (i.e. within the last 12 months) history of a problem, and a nexus between the problem and the goals of the pre-placement evaluation (see CPG).

Describe Problem:

Exam Indicated (check if performed):

	▶ _____	Physical exam of the	A44
	▶ _____	Physical exam of the	A45
	▶ _____	Physical exam of the	A46
	▶ _____	Physical exam of the	A47
	▶ _____	Physical exam of the	A48

Clinical Findings:

Testing Required:

Dipstick (+) for blood unless menses	▶ _____	Urinalysis, Complete	A63
Dipstick (+) for protein	▶ _____	Urinalysis, Complete	A63
Near vision < target #5 OU	▶ _____	Vision retest with near point card	A69

(See Next Page)

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
Propoxyphene (Darvocet) use in last 6 months, but denies use in last month	▶	_____ Propoxyphene (urine)	A88
Tramadol (Ultram) use in last 6 months, but denies use in last month		_____ Tramadol (urine)	A90