



Client Request for Services - Broussard

Client Information

Company Name		Date
Company Billing Address		
City	State	Zip Code
Employee Name	Employee Last 4 SSN/ID#	
Testing Authorized By	Phone Number	
Send Results To	Email Address	

Testing Location

BROUSSARD 1028 Forum Drive, Broussard, LA 70518 PH: 337-704-0981 Fax: 337-74-0982 xmdcorporateclinic@xstrememd.com

Physical Exam Requested

- Annual / Periodic
- DOT / CDL Physical
- Non-DOT Physical
- Pre-Employment Standard Non-Dot Physical
- Fit for Duty
Medical records from treating facility/physician required prior to exam
- Company Specific Physical
Company specifications / guidelines required 48 hours in advance for review prior to testing
- OGUK Physical
- USCG Physical
- Other: _____

Occupational Testing Procedures Required

- Audiometry Initial Retest Pre-Employment
- Respirator Fit Testing w/OSHA Resp. Questionnaire
- Blood Work Specify: _____
- Mask Type: _____
- EKG w. Interpretation
- Fitness Assessment
- Urinalysis / UA Dip
- Respirator Medical Clearance
- L-Spine X-Ray 3 View 2 View
- Pulmonary Function Test w/OSHA Resp. Questionnaire

Urine Drug and Alcohol Collection: *Applicant Must Bring Valid Photo ID*

Reason for Testing

- Pre-Employment Random Reasonable Cause Post Accident Return to Duty Follow-up
- Site Access / Pre-Access Other: _____

Drug Collection

- Non-DOT UDS
- Hair Follicle
- DOT UDS PHMSA USCG FMCSA
- Rapid Urine Dip 10 Panel
- Customer Supplied Chain of Custody Third Party Administrator
- Use XMD Generic Chain of Custody (\$75.00)
- 5 Panel UDS 9 Panel UDS 10 Panel UDS
- Direct Observation
- Synthetic Drug Testing (Generic XMD CCF Codes) Synthetic Marijuana (30380N) Synthetic Stimulants (280N)

Alcohol Collection

- DOT Saliva (QED) Swab
- Non-DOT Saliva (QED) Swab
- DOT BAT
- Non-DOT BAT

COVID-19 Testing

- PCR
- Antigen