

**PLAINTIFF'S EXHIBIT 17-A
PRE-EMPLOYMENT EXAM
DATE OF SERVICE: 04/02/04**

Pre-Employment Exam Records	Y=Yes, we have a copy N= No we do not have a copy or information		
DATE OF SERVICE:		4/2/04	4/19/04
		PROVIDER CASE #: 54185	PROVIDER CASE #: 54763
	Required Forms		
Tiffany Anderson: "NO WORK RESTRICTIONS" NOTED ON REPORT	MEDICAL EXAMINATION REPORT	Y	Y
	LAB/TEST RESULTS (IF APPLICABLE)	N	N
	FOLLOW UP APPOINTMENT INFORM.	N/A	N/A
	INITIAL VISIT FORM	N	N/A
	EXAMINATION AND/OR CONSENT TO TREAT-PROVIDER'S FORM	N	N/A
	CONSENT TO TREAT AND AUTH TO RELEASE INFO TO EMPLOYER'S FORM	N	N
	NURSE'S NOTES	N	N/A
	DOCTOR'S NOTES (TYPED)	N/A	N/A
	INJURY WORKSHEET	N/A	N/A
	WORK STATUS REPORT WORKSHEET	N/A	N/A
	WORK STATUS REPORT	N/A	N/A
	DOCTOR'S FIRST REPORT OF INJURY	N/A	N/A
	CLAIM SUMMARY-PAYMENTS	N	N

Tiffany Anderson:
TA CLEARED FOR RESPIRATOR USE

Tiffany Anderson:
NEGATIVE UA TESTING NOTED ON THE MEDICAL EXAM REPORT

Dameron Hospital Occupational Health Services

525 W. Acacia St., Stockton, CA 95203 (209) 461-3196 opt.2 FAX (209) 461-3123

MEDICAL EXAMINATION REPORT

Employee Name:	Anderson, Tiffany K	Date of Exam:	04/02/2004
Social Security Number:	549-23-5133	Time In:	10:05 AM
Employer:	SJ Mosquito and Vector Control	Time Out:	10:30 AM
Exam Type:	Physical Exam	Case Number:	54185
Medical History			
Denies any significant or disabling condition			
Physical Examination			
Normal exam without significant findings			
Drug and Alcohol Testing			
UDS - NEGATIVE			
Medical Test Results			
Medical Assessment			
No significant findings; no work restrictions			
Recommendations			
Comments			
Physician: Corky Hull, M.D., M.P.H. (Original signature on file)		Date: 04/02/2004	

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MEDICAL EXAMINATION REPORT

Employee Name:	Anderson, Tiffany K	Date of Exam:	04/19/2004
Social Security Number:	549-23-5133	Time In:	1:36 pm
Employer:	SJ Mosquito and Vector Control	Time Out:	2:32 pm
Exam Type:	Physical Exam	Case Number:	54763

Medical History

Denies any significant or disabling condition

Physical Examination

Normal exam without significant findings

Drug and Alcohol Testing

Medical Test Results

Lung Function - Normal

Medical Assessment

No significant findings; no work restrictions

Recommendations

Comments

Physician: Corky Hull, M.D., M.P.H. (Original signature on file)

Date: 04/19/2004

DL-MFR 5/06/01

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Dameron
Hospital

Occupational Health Services

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(209) 461-3196 opt.2 FAX (209) 461-3123

MEDICAL CLEARANCE
FOR
RESPIRATOR USE

Date: 04/19/2004

Requested By: SJ Mosquito and Vector Control

Employee Name: Anderson, Tiffany K

Stockton, CA 95206-

Social Security Number: 549-23-5133

In accordance with CFR 29, 1910.134 and CRR Title 8, Section 5144, it is my medical opinion that this employee is:

- ☒ Medically qualified for respirator use
☐ Not medically qualified for respirator use
☐ Medically qualified with the following restrictions:

At the time of examination, results of the medical examination were discussed with the employee including any findings that require further medical evaluation or treatment.

Signature:

[Handwritten Signature]
(Original signature on file)

Date: 04/19/2004

Title 8 violation
deprivation of treatment

DH-Respirator 3/13/00

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