

**TOWN OF WRIGHTSVILLE BEACH FIRE**

DATE \_\_\_\_\_

NAME \_\_\_\_\_

SS# \_\_\_\_\_

DOB \_\_\_\_\_

**MD EXAM**

VITALS: HT \_\_\_\_\_ WT \_\_\_\_\_ BP \_\_\_\_\_ P \_\_\_\_\_ R \_\_\_\_\_

VISION : B \_\_\_\_\_ R \_\_\_\_\_ L \_\_\_\_\_ CORRECTED YES/NO

EXEC 11 ( 1 RED SST& 1 LAV )  
PSA ( ANNUAL ONLY at AGE 40 + )  
URINE ( TO GO WITH BLOOD )

PPD

PFT

AUDIO

CHEST XRAY ( PA ) BASELINE & EVERY 5 YRS OR AS  
NEEDED

EKG YEARLY

STRESS TEST (BASELINE 45 YRS + THEN EVERY 3-5 YRS  
UNTIL AGE 55, THEN YEARLY)

DRUG SCREEN (BASELINE ONLY) 9-PANEL W/ EXP. OPIATES