

California State University, Long Beach

Occupational Health Program

Date: _____

To: Employee

From: Medical Monitoring Coordinator
CSULB Safety and Risk Management

Subject: Medical Examination Appointment

This is to remind you that you are scheduled for _____
at _____ on _____ at _____

Please complete the indicated sections of all attached forms and take them with you to the appointment.

In preparation for your physical examination:

DO NOT smoke, use bronchodilators or asthmatic sprays for at least one hour prior to your examination. If there is a medical reason for using bronchodilators or asthmatic sprays within the hour before the appointment, inform the examining physician.

If you are exposed to loud sounds in the fourteen hours prior to your appointment, wear hearing protection during that time.

If for any reason you are unable to keep your appointment, please let Safety and Risk Management know as soon as possible so that I may reschedule your appointment. If you have any questions, please call me at X-52283.

c: Appropriate Administrator