



County of Alameda Referral Form for Pre-Employment Health Screening Only Sedentary Positions (Form 430300-3)

The Agency/Department representative should complete the information below for sedentary positions that do not initially require TB testing, vaccinations, or a respirator medical evaluation. Please see the instructions below.

Please consult the Agency/Department list of job classifications and exam types to determine which positions qualify for this streamlined procedure. For TAP candidates or retired annuitants, the exam type for the job classification in which the candidate will be working applies.

You may request a copy of your Agency/Department list from Sean Mullen at 510-272-6045.

Candidate Name:	Date of Birth:
Address:	Phone:
Agency/Dept:	Unit:
Job Classification:	Exam Type: Sedentary
Date Health Questionnaire Given to Candidate:	Date Due to AHS-EHS:
Authorized By:	Date:
Fax Results To (Name):	Fax #:

Instructions:

The Agency/Department representative must:

- Complete this form and fax it to Alameda Health System-Employee Health Services (AHS-EHS) at 510-346-7579 and to the Risk Management Unit at 510-272-6815.
- Call AHS-EHS at 510-346-7551 to confirm receipt of the referral.
- Provide the candidate with the Health History Questionnaire and the date it is due to AHS-EHS. The representative is to complete the Agency/Department information at the top of page 1.

The candidate must:

- Complete and submit the Health History Questionnaire to AHS-EHS via fax, mail, or in-person so that AHS-EHS will have them by the due date.

AHS-EHS
15400 Foothill Blvd., Building "C", 1st Floor, Room #130
San Leandro, CA 94578
Phone: 510-346-7551 / Fax: 510- 346-7579

- Contact AHS-EHS to confirm receipt of the documents if faxed or mailed.

AHS-EHS will:

- Fax a medical clearance or a request for an exam/test to the Agency/Department representative within three business days of receipt of the completed Health History Questionnaire.