



AIRPORT MEDICAL SOLUTIONS, INC.

8181 NW 36TH ST Suite # 29

DORAL, FL 33166

PH: 305.470.2220 - 305.470.0123

FAX: 305.470.2765 – 866.919.9349

EMPLOYER AUTHORIZATION FORM

DOT/FAA MANDATED EMPLOYEES ARE TESTED FOR: **THC-COC-PCP-OPI-AMP**
MUST HAVE PICTURE ID

Please report to the designated collection site **IMMEDIATELY**

COMPANY NAME: _____

EMPLOYEE NAME: _____

EMPL. ID or Last 4 of S.S. #: _____

AUTHORIZED BY: _____

PHONE: _____

DATE/TIME GIVEN: _____ AM PM

FAA ONLY

FLIGHT CREW

FLIGHT ATTENDANT

FLIGHT INSTRUCTOR

AIRCRAFT DISPATCHER

AIRCRAFT MAINTENANCE

GROUND SECUR. COORD.

AVIATION SCREENER

AIR TRAFFIC CONTROL

DRUG TEST TO BE PERFORM (Check one)

DOT DRUG SCREEN

NON DOT DRUG SCREEN

OTHER – SPECIFY: 7 PANEL 10 PANEL

REASON FOR TEST (Check one)

Pre Employment Post Accident

Random Follow Up

Reasonable Suspicion Return to Duty

ALCOHOL TEST TO BE PERFORM (Check one)

DOT BREATH ALCOHOL

NON DOT BREATH ALCOHOL

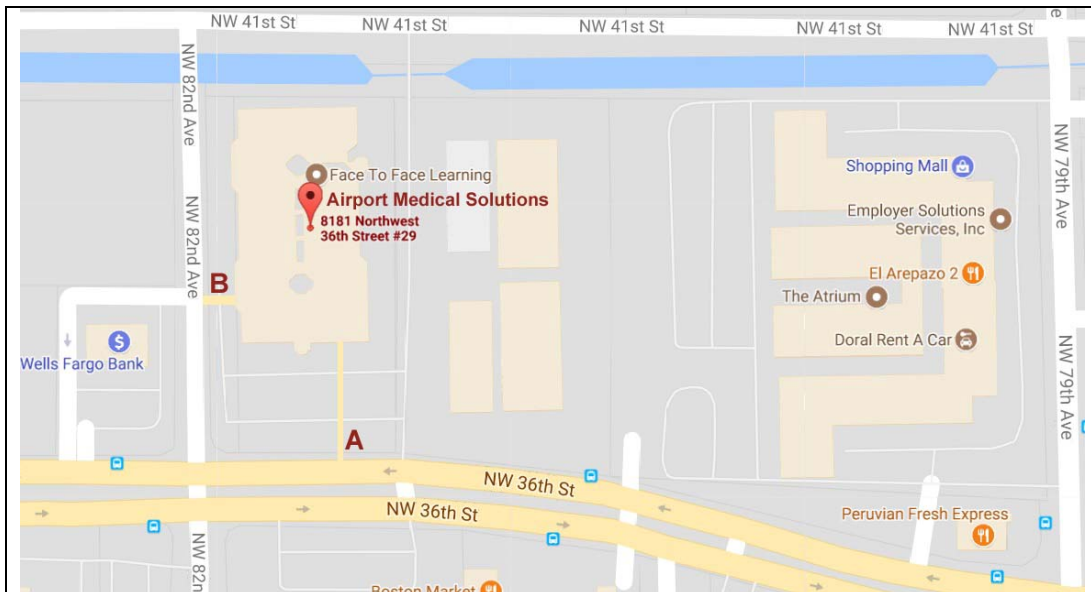
REASON FOR TEST (Check one)

Pre Employment Post Accident

Random Follow Up

Reasonable Suspicion Return to Duty

OTHER TESTS DOT Physical Vision Test Other -



ENTRANCES:

- A – THRU NW 36TH STREET**
- B – THRU NW 82ND AVENUE**
- C – THRU NW 41ST STREET**

OFFICE HOURS

Monday – Friday: 8:30AM – 5:00PM

CLOSED From 12:30PM – 1:00PM (LUNCH)

*****LAST WALK-IN 4:45PM*****

For after hours testing please call 786-897-1244