

City of Portland Authorization Form

Instructions and Notes for Employees:

- ✓ Please bring this Authorization Form, your Employee ID to any ConvenientMD location
- ✓ Fasting is not necessary
- ✓ After the service is completed, your Participation Status will be reported to the City of Portland.

Employer and Employee Information

Employer: City of Portland

Employee Name: _____

Employee Job Title: _____

Employee Member ID: _____

Services Required:

Biometric Screening

Results

ConvenientMD Staff: Please verify account protocol on the Occupational Health Directory

- Occupational Health Directory Account: **City of Portland – Biometric Screening – Occ Health**
- Results should be recorded & discussed per protocol
- Results should be sent to ConvenientMD Employer Services Team once visit is completed