Tower Health Urgent Care

Advancing Health. Transforming Lives.

Limerick FIT-FOR-DUTY REPORT

Name: _____ Date: _____

Employer: _____

Position: _____

Based on NFPA 1582 Physical examination and available office/laboratory testing, this firefighter is:

☐ **FIT FOR DUTY**

☐ **UNFIT** for duty; **NOT CLEARED**

Examiner's Signature: _____

Examiner's Name: _____ MD/ DO/ PA-C/ NP

"SAMPLE"