

COUNTY OF STANISLAUS REQUEST FOR MEDICAL SERVICE INDUSTRIAL INJURY

Employee _____

Department _____

Date of Injury_____

In an emergency you may go to any hospital emergency room. You may seek treatment at any one of the following Occupational Clinics for non-emergency treatment.

Kaiser

4601 Dale Road, 4th Floor Modesto, CA 95356 209-735-4100

Hours: Monday - Friday 8:30 am - 5:00 pm

Concentra

1524 McHenry Ave., Suite 135 Modesto, CA 95350 209-575-5801

Hours: Monday - Friday 8:00 am. - 5:00 pm

California Occupational Physicians 2112 McHenry Ave. Modesto, CA 95350 209-572-2114 Hours: Monday - Friday 8:00 am - 5:00 pm WorkHub

1501 Oakdale Road, Suite 301 Modesto, CA 95355 209-622-0936 www.workhubwhs.com

Hours: Monday - Friday 8:00 am - 5:00 pm Saturday & Sunday 9:00 am - 1:00 pm

> **Concentra** 1340 Mitchell Road Modesto, CA 95351

209-581-9711

Hours: Monday – Friday 8:00 am - 5:00 pm

AFTER HOURS & WEEKENDS ONLY Memorial Prompt Care

1700 Coffee Road Modesto, CA 95355 209-526-4500

Hours: 24 hrs. a day, 7 days a week

HEALTH CARE PROVIDERS: Please provide initial treatment and evaluation of this injured employee, then complete a Doctor's First Report of Occupational Injury of Illness and send it to:

> PEGASUS RISK MANAGEMENT PO BOX 5038 MODESTO, CA 95352-5038 PHONE: 209-574-2800 FAX: 209-574-2900

Supervisor's Signature

Date