

PHYSICAL EXAMINATION REPORT

For S or P Endorsement

Wisconsin Department of Transportation (WisDOT)

MV3030B 8/2015 Ch. 343 Wis. Stats. & Trans. 112 Admin. Code

Incomplete forms will be returned for completion.

Medical Review, PO Box 7918, Madison, WI 53707-7918

Telephone: (608) 266-2327 FAX: (608) 267-0518

Email: dmr@wisconsin.gov

Applicant Name		Driver License Number		Birth Date	
Street Address		City	State	ZIP Code	(Area Code) Telephone Number

Note: Pursuant to Trans 112, Wis. Admin. Rules (copy available upon request), this report is to be completed prior to consideration for licensing. The Secretary of the Department of Transportation is, by statute, responsible for the decision of driver's licensing. Any charges or fees for the medical or vision examinations and the preparation or completion of this form are responsibility of the applicant (driver).

VISION SECTION - REQUIRED					
Numerical readings must be provided.			YES	NO	
ACUITY	UNCORRECTED	CORRECTED	<input type="checkbox"/>	<input type="checkbox"/>	Is the temporal field of vision at least 70 degrees from center in <u>each</u> eye?
Right Eye	20/	20/	<input type="checkbox"/>	<input type="checkbox"/>	Can the applicant recognize and distinguish the colors red, amber, and green?
Left Eye	20/	20/	<input type="checkbox"/>	<input type="checkbox"/>	Are corrective lenses required when driving?
			Medical License No. (if different from below)		Date (m/d/yyyy)

X

(Examining Authority Signature)

SECTION A		APPLICANT completes section A when holding/applying for P and S endorsement.	HEALTH CARE PROFESSIONAL completes section B for applicant holding/applying for S endorsement.	SECTION B	
YES	NO			YES	NO
<input type="checkbox"/>	<input type="checkbox"/>	Alcohol or other drug abuse or dependency within the past 12 months	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Alcohol or other drug abuse or dependency within the past 12-24 months not controlled by treatment	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	NeuroMuscular disease, e.g., ALS, MS, Head Trauma	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Diabetes or elevated blood sugar controlled by: <input type="checkbox"/> Diet <input type="checkbox"/> Pills <input type="checkbox"/> Insulin	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Heart disease or heart attack, stroke, other cardiovascular condition	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Heart surgery (valve replacement/bypass, angioplasty, pacemaker, AICD) Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Pulmonary disease or condition, positive TB communicable form, emphysema, COPD	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Required oxygen use	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Sleep disorders, pauses in breathing while asleep, daytime sleepiness, loud snoring	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Loss of body control, or altered consciousness Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Seizures, epilepsy Date of last episode: _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Kidney disease, dialysis	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Blood pressure over 180/105 (if yes, provide 3 BP readings taken over a 2-week period, separated by at least 1 day)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Mental/Emotional Conditions	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Missing or impaired hand, arm, foot, leg	<input type="checkbox"/>	<input type="checkbox"/>	
N/A	N/A	Inability to hear instructions given in normal conversational tone <input type="checkbox"/> Corrected by Hearing aid	<input type="checkbox"/>	<input type="checkbox"/>	
N/A	N/A	Any medication that would interfere with the safe operation of a school bus	<input type="checkbox"/>	<input type="checkbox"/>	
APPLICANT:		For any YES answer, indicate onset date, diagnosis and any current limitations. List all medications (including over-the-counter medications) used regularly or recently.			

Sample History And Physical Examination Report

Michael Rajnik



Sample History And Physical Examination Report:

Lippincott Williams and Wilkins' Administrative Medical Assisting Elizabeth A. Molle, Laura Southard
Durham, 2003-12-01 This text is designed to meet the needs of students in medical assisting who are studying the administrative portion of the curriculum as well as students in transcription coding and related programs This competency based textbook provides a wealth of guidance for administrative skills The text covers the front office topics scheduling billing coding bookkeeping office management and insurance issues Helpful pedagogy including Key Terms a Glossary and Critical Thinking Challenges familiarize students with the material and help with problem solving The ancillary package includes an Instructor's Resource Kit with an Instructor's Manual and Resource CD ROM as well as a student study guide Visit <http://connection.lww.com/go/molleadmin> for more information

Diehl's Canadian Medical Transcription - E-Book Radica Bissoondial, Coralie Hockly, 2025-11-12 Founded on the most trusted authority in medical transcription for more than 30 years Diehl's Canadian Medical Transcription helps you master the fundamentals of medical transcription and meet the challenges of the evolving medical transcription field in Canada Diehl's delivers proven practical training in the skills and technology essential to success including proofreading editing speech recognition technology and more This thoroughly revised and updated text is the only comprehensive Canadian medical transcription text written to reflect Canada's health care system fully preparing you for your role in health information management UNIQUE The only truly comprehensive Canadian medical transcription text written to reflect Canada's health care system Streamlined four colour design comprehensive art program and example and practice features help reinforce need to know concepts Significant number of practice exercises and types of reports gives you a true reflection of the types of documents you will be transcribing Comprehensive coverage and practical exercises demonstrate fundamental editing transcription concepts and boost your proficiency in punctuation capitalization numbers word endings formation of plural forms and abbreviations and symbols Up to date information includes a chapter dedicated to transcribing for the medical specialties as well as coverage of the electronic medical record EMR and proofreading skills Content reflects current privacy legislation PIPEDA and changes to provincial and territorial Freedom of Information acts Exercises and helpful hints enhance your proofreading and editing skills to help you prevent common errors Extensive practice and review exercises on the companion Evolve website reinforce your comprehension and give you the experience to confidently move into the transcription profession Corresponding Workbook offers a wealth of additional practice exercises focused on 17 medical specialty areas Sold separately The only truly Canadian Medical Transcription text on the market Streamlined four colour design comprehensive art program and example and practice features help reinforce need to know concepts Increased number of practice exercises and types of reports give students a true reflection of the types of documents they would be transcribing Greater coverage and practice of proofreading skills Coverage of Electronic Medical Records EMR Reflects current privacy legislation PIPEDA and changes to

provincial and territorial Freedom of Information acts

Respiratory Care: Patient Assessment and Care Plan

Development David C. Shelledy, Jay I. Peters, 2021-02-08 Respiratory Care Patient Assessment and Care Plan Development Second Edition describes the purpose of patient assessment and then guides the reader through the process of reviewing existing data in the medical record

The Medical Transcription Workbook Linda C. Campbell, Diane S. Heath, Sally C. Pitman, 1999 *Merrow v. Bofferding*, 458 MICH 617 (1998), 1998 106331 106332 California. Court of Appeal (1st Appellate District). Records and Briefs California (State)., Administrative Medical Assisting Wilburta Q. Lindh, Marilyn S. Pooler, Barbara M. Dahl, 2005-12 ADMINISTRATIVE MEDICAL ASSISTING *Medical Transcription* Lois R. Tutherly, 1987

Alameda County Public Health News, 1927 Refresher Carol L. Gupton, 2000 **California. Court of Appeal (2nd Appellate District). Records and Briefs** California (State)., Number of Exhibits 9 Received document entitled APPENDIX IN SUPPORT OF PETITION FOR WRIT *Special Report* Great Britain. Food Investigation Board, 1919 **Persian Gulf**

War Illnesses United States. Congress. House. Committee on Veterans' Affairs, 1997 *Physical Examination and Health Assessment* Carolyn Jarvis, 2001-12-19 This comprehensive easy to read full color textbook is a standard in physical assessment that features a holistic approach and a strong nursing perspective Step by step guidelines demonstrate the skills necessary to take a complete health history and perform a thorough physical examination on clients of all ages and cultural backgrounds as well as pregnant women This edition includes over 240 new full color photographs and illustrations depicting a wide range of conditions It also contains a new chapter on the pregnant female Video Critical Thinking Questions in each body system chapter correspond with the Saunders Physical Examination and Health Assessment Series Nursing diagnoses are separated into Risk and Wellness categories This edition also includes updated appendices on the 1999 Recommended Childhood Immunization Schedule for the U S and the CDC Standard Precautions and Transmission Based Precautions

Includes a CD ROM with case studies and a FREE SIMON website at www.harcourthealth.com SIMON Jarvis **Special Report - Great Britain. Dept. of Scientific and Research. Food Investigation Board** Great Britain. Food Investigation Board, 1919 **Special Report - Food Investigation Board** Great Britain. Food Investigation Board, 1919 *Public Health Reports*, 1930

Naval Reserve Regulations United States. Naval Reserve, 1929 The Journal of the Indiana State Medical Association Indiana State Medical Association, 1912 Includes the association's membership roster and its complete program and annual reports

"Code of Massachusetts regulations, 1998", 1998 Archival snapshot of entire looseleaf Code of Massachusetts Regulations held by the Social Law Library of Massachusetts as of January 2020

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