

Since 1983



1961 Diamond Springs Road
Virginia Beach, VA 23455
Phone (757) 457-9312
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**MANCON ODOT DISTRICT 3 ASHLAND OH
PHYSICIAN/DRUG SCREEN PANEL**

For the State of Ohio, injured employees may visit any qualified medical provider for treatment. Hospitals and Clinics located in close proximity to the work site have been identified, for use if needed.

The following medical facilities may be used by MANCON employees for treatment of an on-the-job injury or other accident. All on-the-job injuries or other accidents **MUST** be reported **IMMEDIATELY** to a MANCON SUPERVISOR or MANAGER and an accident report **MUST** be filled out.

***Contact HR before sending employee for drug screen**

Drug Screen Location

Quest Diagnostics* - Mansfield
339 Cline Ave
Mansfield, OH 44805
419-522-9010
Drug Screen: M-F 8:00 am-12:30 pm & 1:00 pm-2:30 pm

Quest Diagnostics – www.questdiagnostics.com – Click on Make an Appointment to schedule a drug screen

Hospital – Emergency (Life or Limb Threatening, After-Hours Care)

Samaritan Regional Health System
1025 Center St
Ashland, OH 44805
419-289-0491

Medical Providers and Clinics (Non Life or Limb Threatening)

Hometown Urgent Care*
4164 Burbank Rd
Wooster, OH 44691
330-345-8032

Cleveland Clinic Wooster Family Health and Surgery
Center
1740 Cleveland Rd
Wooster, OH 44691
330-287-4500

Selected Medical Facility (Fill in selected site, if not listed here, then circle below.)

Facility Name: _____

Facility Address: _____

Facility Phone: _____

***Any location within this site can be chosen**

I have selected the above circled facility to administer medical treatment for my potential worker’s compensation claim.

I have chosen not to seek medical treatment or my workplace injury. I understand that if I feel the need to seek medical treatment for this incident at a later time, I may do so by visiting one of the above approved medical facilities. It is my responsibility to inform MANCON Corporate – Worker’s Comp – at (757) 457-9312 if/when I seek medical treatment.

I do not want to claim an injury at this time.

Signature

Date