



# BUSINESS HEALTH PARTNERS

“Partners with Business & Industry”

Date: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Representative Approving Treatment: \_\_\_\_\_ Email: \_\_\_\_\_

Jobsite Contact & Phone # for follow up on patient: \_\_\_\_\_

Fax # \_\_\_\_\_

Patient Name: \_\_\_\_\_

DATE OF INJURY: \_\_\_\_\_

**\*This note authorizes the above patient to be seen and treated by Business Health Partners for the injury/illness which occurred on the above date. *In the event of an after-hours fee, that is not paid 100% by the insurance company, the unpaid balance will be billed to your company for payment. In addition, any remaining charges not paid, according to Louisiana Workers Compensation fee schedule, will be the company’s responsibility.***

Person to contact for further treatment: \_\_\_\_\_

Telephone/Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

**\*\*\*\*Post Accident Testing required\*\*\*\*  
(Circle your selection)**

Drug Screen	Non-DOT	DOT	Quick Test __5__10
Breath Alcohol	Non-DOT	DOT	Disa

\_\_\_\_\_  
Signature of Representative

**LAKE CHARLES**

4150 Nelson Rd. Building B Suite 5  
Lake Charles, LA 70605  
Office (337) 656-7703 Fax (337) 656-7676  
**After Hours Contact:**(337) 302-2011  
lakecharles@businesshealthpartners.com

**SULPHUR**

3649 South Beglis Parkway Sulphur, LA 70665  
Office (337) 626-1011 Fax (337) 558-5995  
**After Hours Contact:**(337) 302-2011  
sulphur@businesshealthpartners.com

**NEDERLAND**

1005 Nederland Avenue Nederland, TX 77627  
Office (409) 299-5288 Fax (409) 237-5169  
**After Hours Contact:**(409) 527-1114  
nederland@businesshealthpartners.com

**DERIDDER**

301 S. Washington St Suite B  
DeRidder, LA 70634  
Office (337) 348-0842 Fax (337) 401-3380  
deridder@businesshealthpartners.com



**DEER PARK**

1806 Center St. Deer Park, TX 77536  
Office (281) 402-8623 Fax (281) 402-8624  
**After Hours Contact:**(346) 877-0957  
deerpark@businesshealthpartners.com