

PRO-MOTION REHAB, INC.
1787 – 3 US HWY 64 W
MURPHY, N.C. 28906

The state of North Carolina requires that all employees, working for a healthcare company, must have a physical examination completed by a Doctor. Please complete the following certificate for the employee mentioned below.

This certifies that _____ was given a Physical Examination on _____ and was found to be in good physical and mental health with no limitation in performing routine job duties, nor has any communicable disease which could endanger any patients.

TB Test Results _____ Date _____ Read By _____

Other Tests _____ Result _____ Date _____

Comments, Treatments, Other:

Physicians Signature License No. State Date