

MultiCare Vendor/Contractor Protocol Enrollment

To enroll your company for MultiCare OccMed services to support badging requirements for your employees, complete this form, sign and return to Account Services at: email to occmed@multicare.org (preferred), or fax to 253-459-6708

Please include a commercial account application if not already open.

Company/Employer

Company Name: _____	Dept / Division: _____
Resulting Contact Name: _____	Contact Tel: _____
Contact Email: _____	Contact Fax: _____

Protocols for Badging

Drug & alcohol testing: _____ No, we have a company drug testing program and do not require this from MultiCare
 _____ Yes, we need drug & alcohol testing from MultiCare. Send results to the contact above by:
 _____ Secure web portal. *We will send information to activate your web account*
 _____ Automatic fax

Screening Tests and Immunity Services *All vendor/contractor accounts are set up with the following protocols available as needed. Specify what services are needed for each employee by completing an Authorization Form.*

Tuberculosis Testing TB Skin Test (option 1 – recommended)
 TB QuantiFERON Gold blood test (option 2)

Vaccinations Immunization-Flu
 Immunization-Tetanus/Diphtheria/Pertussis (Tdap)
 Immunization-Hepatitis B (3 doses required)
 Immunization-Measles, Mumps, Rubella (MMR, 1 or 2 doses required by CDC)
 Immunization-Varicella (chicken pox, 2 doses)

Immunity Blood Tests (Titers) Titre-Hepatitis B (3 doses required)
 Titre-Measles, Mumps, Rubella (MMR, 1 or 2 doses required by CDC)
 Titre-Varicella (chicken pox, 2 doses)

Resulting for Screening Tests & Immunity Services

For the following: _____ Email _____ US Mail to:
 • TB Skin test records
 • Blood test records
 • Immunization records
 _____ Secure fax number below*:
 _____ Address

**By indicating fax resulting, the employer confirms employee/candidate private information will be protected.*

 City, State, Zip

Enrollment Form Completed by

_____	_____
Print Name	Print Title
_____	_____
Signature	Date

Office Use: Systoc ID _____ eScreen ID: _____