



Hospital for Special Surgery
535 East 70th Street
New York, NY 10021

MEDICAL HISTORY STATEMENT

I am free from any health impairment which is of potential risk to patients or personnel or which might interfere with the performance of my duties, including the habituation or addiction to depressants, stimulants, narcotics, alcohol, or other drugs or “substances” which may alter my behavior.

YES **NO**

SIGNATURE

DATE

PRINT NAME

IF YOUR RESPONSE TO THE ABOVE STATEMENT IS “NO,” HSS OCCUPATIONAL HEALTH WILL CONTACT YOU AND PROVIDE INFORMATION CONCERNING COUNSELING.