



Authorization for Medical Services

Worker's Comp Insurance Information

Sedgwick

PO Box 14629
Lexington, KY 40512-4629
(916) 852-2953

Policy Number: AO-CSURMA-19

Associated Students HR Contact:
John Doebler, 818-677-4206

Reason: Medical treatment for work-related injuries and illnesses

Location 1: Kaiser Permanente - Panorama City, Occupational Health Center

Address: 1st Floor North 2 Medical Offices,
Rm: 156
8250 Woodman Ave
Panorama City, CA.
Hours: Monday - Friday, 8:30 a.m. to 5 p.m.
Phone: (818) 375-2233

Location 2: Kaiser Permanente - Woodland Hills, Occupational Health Center

Address: 1st floor Northside Medical Offices, Entrance 9,
5601 De Soto Ave.
Woodland Hills, Ca.
Hours: Monday - Friday, 8:30 a.m. to 5 p.m.
Phone: (818) 719-3006

Location 3 Concentra – Chatsworth

Address: 9700 De Soto Avenue
Chatsworth, CA 91311
Hours: Monday – Friday 8 am – 5 pm
Phone: (818) 882-8100

We, Associated Students CSUN Inc., are sending: _____ to
your treatment facility in accordance with the terms of the Workers' Compensation Laws.
Please submit your report to Sedgwick with complete medical information. Please contact the
Associated Students HR contact above to review any work restrictions.

Employer: Associated Students, California State University, Northridge Inc.

Supervisor: _____ Date: _____

If patient is able to return to work today or tomorrow, please show date and time below-sign and
give to patient to return to employer. Please submit your usual first report in any case.

Date/Time: _____ Authorized by: _____