Physicians First Messages January 2025 O/C Schedule

Account Number	Forward Number				
OnCall 1					
Name-	Initials-	Phone - ()	-	
OnCall 2					
Name-	Initials-	Phone - ()	-	
OnCall 3					
Name-	Initials-	Phone - ()	-	
OnCall 4					
Name-	Initials-	Phone - ()	-	
OnCall 5					
Name-	Initials-	Phone - ()	-	
		·			

Weekday OnCall Days/Times: am/pm to am/pm

Weekend OnCall Days/Times: am/pm to am/pm

* Please note any office closings on the calendar *

Mon	Tue	Wed	Thu	Fri	Sat
		1 New Year's Do	2	3	4
6	7	8	9	10	11
13	14	15	16	17	18
20 Martin Luther King, Jr. Day	21	22	23	24	25
27	28	29	30	31	
	20 Martin Luther King, Jr. Day	13 14 20 Martin Luther King, Jr. Day	6 7 8 13 14 15 20 Martin Luther King, Jr. Day	6 7 8 9 13 14 15 16 20 Martin Luther King, Jr. Day 22 23	6 7 8 9 10 13 14 15 16 17 20 Martin Luther King, Jr. Day

Place OnCall Initials in Box where Applicable

For all scheduled coverage you must fill out this OnCall form and fax it to (866) 247-9598,

Or email it to us: customerservice@pfminy.com. We will not accept OnCall information verbally

or if you need to speak to a representative, please call (866) 247-9594

Comments:

This form can be submitted daily, weekly, or monthly, but must accompany all revisions to your OnCall schedule.