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U.S. Department of Transportation
 Federal Motor Carrier
 Safety Administration

MEDICAL EXAMINER'S CERTIFICATE

(for Commercial Driver Medical Certification)

CMV DRIVER CERTIFICATION

I certify that I have examined (last name) TEJEDA (first name) BRYAN in accordance with (please check only one):

- ☒ the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply) OR
☐ the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) with any applicable State variances (which will only be valid for intrastate operations), and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply):

- ☒ Wearing corrective lenses ☐ Accompanied by a waiver/exemption (specify type): _____ ☐ Driving within an exempt intracity zone (49 CFR 391.52) (Federal)
☐ Wearing hearing aid ☐ Accompanied by a Skill Performance Evaluation (SPE) Certificate ☐ Qualified by operation of 49 CFR 391.64 (Federal)
☐ Grandfathered from State requirements (State)

Medical Examiner's Certificate Expiration Date

The information I have provided regarding this physical examination is true and complete. A complete Medical Examination Report Form, MCSA-5875, with any attachments embodies my findings completely and correctly, and is on file in my office.

09/22/2025

MEDICAL EXAMINER INFORMATION

Medical Examiner's Signature

N. Naparstek

Medical Examiner's Name (please print or type)

Naparstek, Nathalie

Medical Examiner's State License, Certificate, or Registration Number

PA9110607

Medical Examiner's Telephone Number

(954)781-7248

Date Certificate Signed

09/22/2023

☐ MD ☒ Physician Assistant

☐ Advanced Practice Nurse

☐ DO ☐ Chiropractor

☐ Other Practitioner (specify) _____

Issuing State

FL

National Registry Number

2734902931

CMV DRIVER INFORMATION

Driver's Signature

B. Tejeda

Driver's Address

Street Address: 3941 SW 154 CT

City: Miami

State/Province: FL

Zip Code: 33185

CLP/CDL

☒ Yes ☐ No

Driver's License Number

T230-060-02-346-0

Issuing State/Province

FL



Search Medical Examiners

City, State or Zipcode **10** Miles

National Registry Number

Business Name

2734902931

First Name

Last Name

Basic Search

Search

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+ Mrs. Nathalie Naparstek (Physician Assistant)

Concentra

311 South Cypress Road Pompano Beach, FL 33060

(954) 781-7248

N/A [Directions](#)

+ Mrs. Nathalie Naparstek (Physician Assistant)

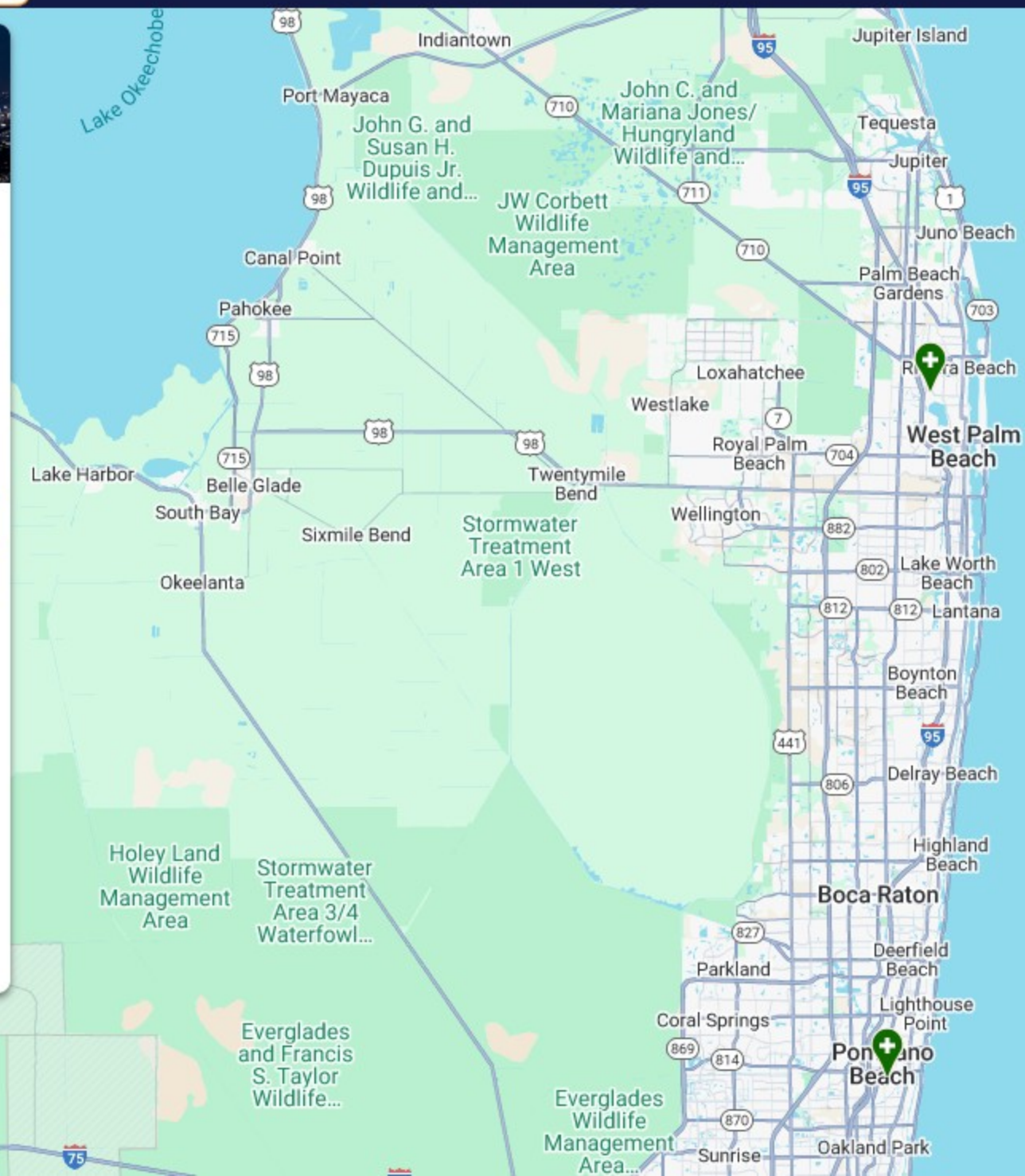
Concentra

4455 Medical Center Way West Palm

Beach, FL 33407

(561) 881-0066

N/A [Directions](#)





Mrs. Nathalie Naparstek
(Physician Assistant)



Email



Website

Practice Business Name

Concentra

Address

311 South Cypress Road Pompano Beach, FL 33060

Hours of Operation

-

National Registry Number

2734902931

Certification Date

09/12/2018

Distance

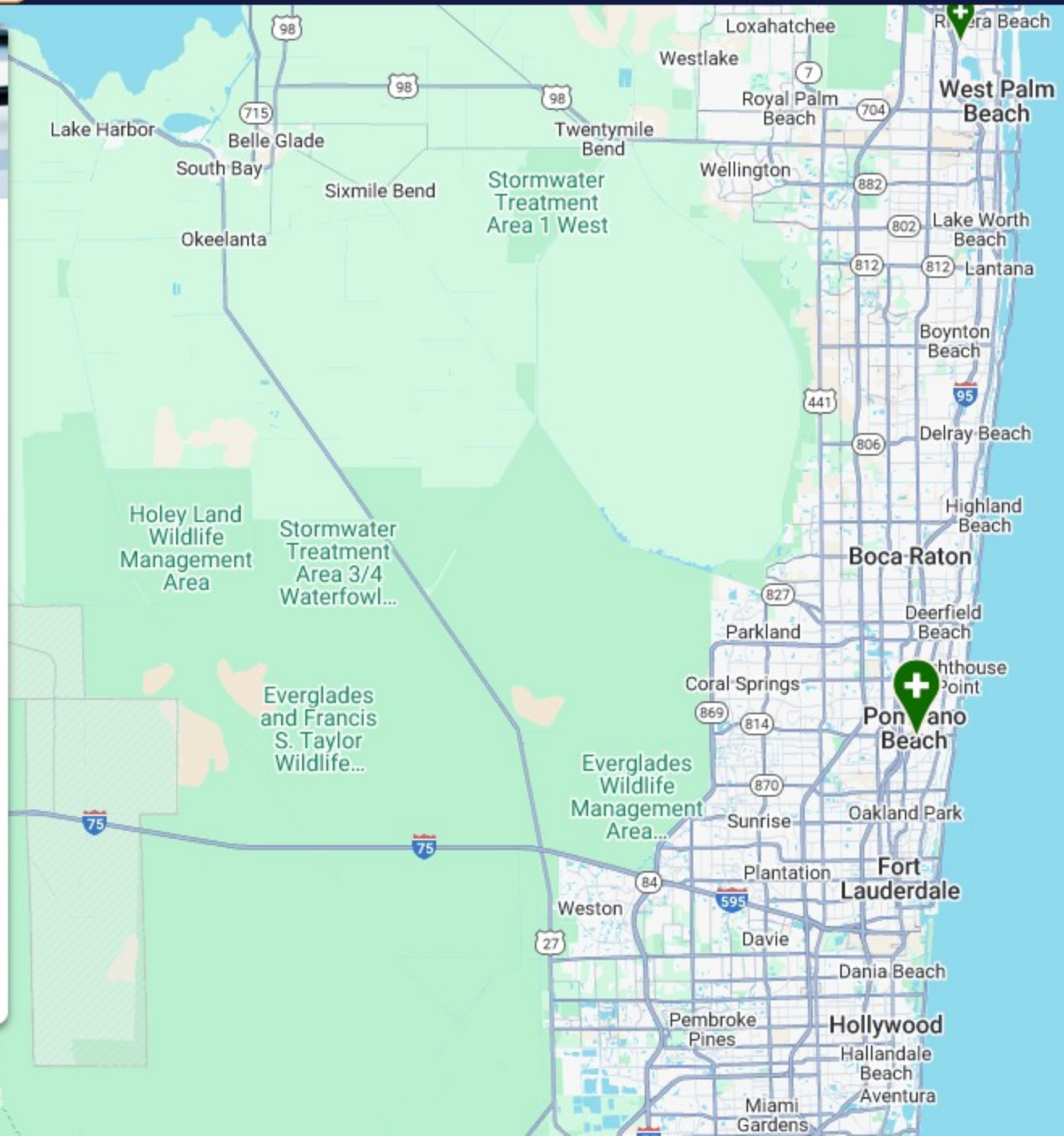
N/A

Business Phone

(954) 781-7248

Business Fax Number

-



Query Detail

Query Overview

Employer Conducting Query: ZIGI FREIGHT INC (USDOT# 2828543)

Query Result: Driver Not Prohibited

Query Status: Completed (11/18/2024 12:05:46)

Conducted By: Teodora Nikolic | **Query Type:** Pre-employment | **Query Submitted:** Manually

Driver Information

Name: BRYAN TEJEDA

Date of Birth: 9/26/1992

CDL/CLP ⓘ: US-FL-T230060923460

Consent Information

Requested: 11/18/2024 12:05:09

Recorded: 11/18/2024 12:05:46

Status: Provided

Query History

Created: 11/18/2024 12:05:09

Completed: 11/18/2024 12:05:46

Query Result: Driver Not Prohibited

LEARN MORE

 [The Return-to-Duty Process](#)

Open Violations

No Open Violations