

COMPANY: \_\_\_\_\_

IN: \_\_\_\_\_ A/P

OUT: \_\_\_\_\_ A/P

PRIMARY CARE CLINICS OF GEORGIA

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**WORK STATUS REPORT**

Patient: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Smoker: \_\_\_\_\_ Dominant Hand: \_\_\_\_\_ Claim#: \_\_\_\_\_

Diagnosis: \_\_\_\_\_ Injury Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

At This Time:

\_\_\_\_ Patient is unable to return to work.

\_\_\_\_ Patient may return to regular work with no restrictions. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_ Patient may return with limited duties as described below. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_ Seated \_\_\_\_ % of the day

\_\_\_\_ Stand for \_\_\_\_ hour intervals, \_\_\_\_ hours per shift

\_\_\_\_ No \_\_\_\_\_ Limit

\_\_\_\_ Overhead reaching

\_\_\_\_ Repetitive bending

\_\_\_\_ Weight bearing

\_\_\_\_ Stooping

\_\_\_\_ Use of right/left hand

\_\_\_\_ Avoid repetitive squeeze, twist of affected hand

\_\_\_\_ Lifting, pushing, pulling

\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_ 5-8 lbs \_\_\_\_\_

\_\_\_\_ 10-15 lbs \_\_\_\_\_

\_\_\_\_ 20-30 lbs \_\_\_\_\_

The patient will be required to use/wear during the work day:

Crutches Brace Splint Dressing – Keep wound clean, dry, and covered

Medical Necessity of not allowing patient to return to work:

\_\_\_\_\_  
\_\_\_\_\_

Actions taken at today's appointment:

\_\_\_\_\_  
\_\_\_\_\_

Follow up plans:

\_\_\_\_ Patient is released from care on: \_\_\_\_\_

\_\_\_\_ Patient is to return: \_\_\_\_\_ Appointment date/time: \_\_\_\_/\_\_\_\_/\_\_\_\_ at \_\_\_\_: \_\_\_\_ A/P

\_\_\_\_ Recommended Referral/test: \_\_\_\_\_

\_\_\_\_ Work Related New Injury

\_\_\_\_ Work Related Exacerbation of Pr-Existing Condition

\_\_\_\_ Not Work Related

\_\_\_\_ Red Flags/Symptom Magnification