

Attention: John or Eddie D

7 of 8

Alpine Orthopaedic Medical Group, Inc.
ORTHOPAEDIC SURGERY

PETER B. SALAMON, M.D. ROLAND H. WINTER, M.D.
EDWARD L. CANILL, M.D. ANH X. LE, M.D.
VINCENT C. LEUNG, M.D. ALAN T. KAWAGUCHI, M.D.
GEORGE W. WESTIN, JR., M.D. GARY M. ALEGRE, M.D.
GARY T. MURATA, M.D. VANESSA D. BEEMAN, PA-C
STEVEN E. EAGER, M.D.

2488 N. CALIFORNIA ST. STOCKTON, CA 95204 (209) 948-3333

DATE 5/11/09

It is my medical opinion that _____ D O I

Anderson Tiffany

is capable of resuming the activities of his/her occupation as described below:

WORK STATUS:

Regular work as 5/26/09
 Modified work with limitations noted
 Unable to return to work until
Date: 5/26/09

WORK LIMITATION:

(✓) = partial capacity
(x) = no capacity

Bending Reaching Lifting
 Climbing Standing _____ lbs.
 Pulling Pushing Sitting

[Signature] M.D.

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YOU HAVE AN APPOINTMENT WITH DOCTOR:

SALAMON CAHILL LEUNG WESTIN MURATA EAGER

WINTER LE KAWAGUCHI ALEGRE BEEMAN

MON.	TUES.	WED.	THURS.	FRI.
JAN.	FEB.	MAR.	APR.	MAY
JUNE	JULY	AUG.	SEPT.	OCT.
NOV.	DEC.			
1	2	3	4	5
6	7	8	9	10
11	12	13	14	15
16	17	18	19	20
21	22	23	24	25
26	27	28	29	30
31				

TIME 2:10

Return to work 5/26
Lodi PT @ 3:00 5/27
Lodi PT @ 3:00 6/3
Alpine Dr. Murata @ 2:10 6/9
Lodi PT @ 3:00 6/10