

6/20/08

**WORK STATUS REPORT**

**Employee:** Tiffany Anderson **Exam Date:** 06/20/2008  
**Employee ID:** 549-23-5133 **Time In:** 07:58 AM **Time Out:** 09:41 AM  
**Employer:** SJ Mosquito & Vector Control **Guarantor:** AIMS-SACTO 8049  
**Date of Injury:** 6/19/2008 **Claim No:**

**Work Status:** MODIFIED WORK DUTIES  
Effective 06/20/2008 to 06/23/2008

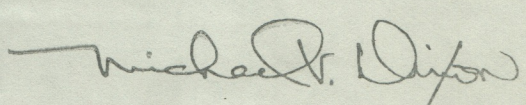
**Work Restrictions:** WORK RESTRICTIONS: No squatting, kneeling or crawling. No climbing ladders. Wear splint/brace as directed. No prolonged standing or walking.

**Patient Injury Description:** CHIEF COMPLAINT: Tiffany states that on June 19, 2008, while working for SJ Mosquito & Vector Control, she injured the right leg while she was climbing up and down the bed of the truck for two days.

**Diagnosis:** Knee effusion, Right  
Sprain/strain knee, cruciate ligament

**Evaluating Clinician:** Mike Dixon PA-C  
Donald Rossman M.D.

**\*Medical Services:** Propoxyphene/Aceta 100-650mg  
X-ray - Knee, Complete RIGHT  
Knee - Brace (Vega)



\*This is a general overview of the visit, it is not a complete list of billable services

**Treatment Level:** Consistent with California Labor Code definition of **MEDICAL TREATMENT**

**Causation:**

**Next Scheduled Appointment:**

<u>Date</u>	<u>Time</u>	<u>Provider</u>	<u>Specialty</u>
6/23/2008	07:00 AM	Dixon, Mike	Occupational Health Services



6120108

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Office of the Secretary

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