

7-15-10

Return to work  
7-26-10

Murata

ALPINE ORTHOPAEDIC PR-2 FORM  
(209) 948-3333  
Patient: Tiffany Anderson

2488 N. CALIFORNIA STREET  
STOCKTON, CA 95204  
Account#: DI 168478

- Periodic report
- Change in work status
- Change in patient's condition
- Need surgery/hospitalization
- Need consultation/referral

- Change in treatment
- Info requested by:
- Released from care
- Request for authorization
- Other:

**PATIENT**  
Account: DI 168478  
Tiffany Anderson  
2 North Avena Ave  
SS#: 549-23-5133

Doctor: Gary T Murata M.D.  
Sex: female DOB: 08/22/1970  
Lodi Ca 95240  
Phone: 209 263-7132

**CLAIM ADMINISTRATOR**  
A.I.M.S. Claim #: VE0700184 DOI: 06/19/08  
Po Box 269120 Sacramento, CA 95826  
Employer: Sj Co Mosquito Control

**DIAGNOSIS**

1. 836.1 /717.7 /

**WORK STATUS:** This patient has been instructed to

- Remain off work until
  - Return to modified work with the following limitations and restrictions:
  - Return to full duty 7-26-10 with no limitations or restrictions.
- Continue with:  Modified Work  Full Duty

Date of Exam: July 15, 2010 Part of Body: Right Knee

**Subjective:** Ms. Anderson has continued improvement of her left knee. She has no pain with walking, no locking, and no recent swelling. She can walk up to 1 hour without having discomfort.

**Objective:** There is no effusion of her knee, mild swelling about the portal sites, but no tenderness. She also has excellent range of motion with no limp.

**ASSESSMENT:** Doing well 4 months following partial lateral meniscectomy and microfracture of the medial femoral condyle.

**PLAN:** Return to regular work. Continue a home exercise program which includes low-impact exercises. Follow-up in the office in 1 month. Again, she is released to regular work on 7-26-10.