

Dameron Hospital Occupational Health Services
420 W. Acacia Street, Stockton, CA 95203 209-461-3196 FAX 209-461-3123

WORK STATUS REPORT

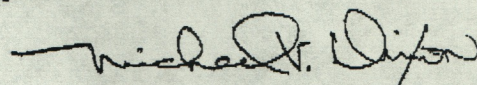
Employee:	Tiffany Anderson	Exam Date:	08/12/2008
Employee ID:	549-23-5133	Time In:	10:30 AM
Employer:	SJ Mosquito & Vector Control	Time Out:	11:19 AM
Date of Injury:	6/19/2008	Guarantor:	AIMS-SACTO 8049
		Claim No:	VE0700184

Work Status: MODIFIED WORK DUTIES
Effective 08/12/2008

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

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

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



***Request for Treatment Authorization**

<u>Date of Request</u>	<u>Treatment</u>	<u>Status</u>
08/12/2008	Referral - Orthopedist	Obtain Authorization

* A separate "Request for Treatment Authorization" with supporting documentation will be submitted to the Claims Examiner

Final Disposition: Referred out

