11-3-09

· Murata

ALPINE ORTHOPAEDIC PR-2 FORM

(209) 948-3333

Patient: Tiffany Anderson

2488 N. CALIFORNIA STREET

STOCKTON, CA 95204 Account#: DI 168478

[x] Periodic report	[] Change in treatment
[] Change in work status	[] Info requested by:
[] Change in patient's condition	[] Discharged
Need surgery/hospitalization	[x] Other: Need MRI of the right knee.
[] Need consultation referral	

PATIENT

Account: DI 168478 Doctor: Gary T Murata M.D.
Tiffany Anderson Sex: female DOB: 08/22/1970

1416 Iris Dr #7 Lodi Ca 95242 SS#: 549-23-5133 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/

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 with no limitations or restrictions.

Continue with:

[x] Modified Work - no squatting or climbing. Intermittent standing and walking. Apparently no light duty is available.

[] Full Duty

Date of Exam: November 03, 2009 Part of Body: Right Knee

Subjective: Tiffany continues to complain of intermittent swelling of her knee. Again she has pictures on her cellular phone showing swelling about the lateral joint line as well as an effusion of her knee.

Today she has mild effusion. She walks with a mild limp. She is tender over the lateral joint line. No sign of infection.