

ALPINE ORTHOPAEDIC PR-2 FORM
(209) 948-3333

2488 N. CALIFORNIA STREET
STOCKTON, CA 95204

Patient: Tiffany Anderson

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:
- Discharged
- Other: Need therapy.

PATIENT

Account: DI 168478
Tiffany Anderson
1416 Iris Dr #7
SS#: 549-23-5133

Doctor: Gary T Murata M.D.
Sex: female DOB: 08/22/1970
Lofi Ca 95242
Phone: 209 333-1037

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 12/22/08. No light duty available.
 - Return to modified work with the following limitations and restrictions:
 - Return to full duty with no limitations or restrictions.
- Continue with: Modified Work Full Duty

Date of Exam: November 18, 2008 Part of Body: Right Knee

Subjective: Tiffany still has a fair amount of pain and swelling of her knee. She walked two hours the other day with increasing pain and swelling. She is still taking up to six Hydrocodone per day.

Objective: She has a mild effusion of her knee with mild generalized tenderness.

Assessment: Continued inflammation following arthroscopy and partial lateral meniscectomy.

Plan: I have asked her to ice her knee. She should continue a home exercise program as well as physical therapy at Lodi P.T. She would benefit from another eight physical therapy sessions. Follow-up in the office in one month.

Addendum: I have asked her to try to reduce her Norco use. I told her that #60 Norco must last at least ten days.

I have not violated Labor Code 139.3, and the contents of the report and bill are true and correct to the best of my knowledge. This statement is made under penalty of perjury. Dated 11/19/08, at San Joaquin County, CA.
Gary T. Murata, M.D./sh