

RETURN-TO-WORK RELEASE

Date _____
 Employee Name _____
 Address _____
 City, State, Zip _____

Please complete the following information and fax it to Northwest Youth Corps, 541-349-5060.

- 1) Is the worker medically stationary? Yes No
- 2) Is the worker released to:
 - full duty without limitation
 - modified duty, from (date) _____ through _____
 - modified hours (specify) _____, from (date) _____ through _____
 (SPECIFY LIMITATIONS BELOW)
- 3) Next scheduled appointment date _____

IMPORTANT: Please complete the following items based on your clinical evaluation of the patient. Any item that you do not believe you can answer should be marked N/A.

1. In a workday, worker can:

	Continuous Hours	Total hours during 8 hr day
a. Sit	0 1/2 1 2 3 4 5 6 7 8 8+	0 1/2 1 2 3 4 5 6 7 8 8+
b. Stand	0 1/2 1 2 3 4 5 6 7 8 8+	0 1/2 1 2 3 4 5 6 7 8 8+
c. Walk	0 1/2 1 2 3 4 5 6 7 8 8+	0 1/2 1 2 3 4 5 6 7 8 8+

2. Worker can use hands for repetitive action as:

	Right Hand	Left Hand
a. Simple Grasping	___Yes ___No	___Yes ___No
b. Pushing & Pulling	___Yes ___No	___Yes ___No
c. Fine Manipulating	___Yes ___No	___Yes ___No

3. Worker can lift:

	Never	Occasional	Frequent	Continuous
a. Up to 5 lbs.	_____	_____	_____	_____
b. 6 - 10 lbs.	_____	_____	_____	_____
c. 11 - 20 lbs.	_____	_____	_____	_____
d. 21 - 50 lbs.	_____	_____	_____	_____
e. 51 - 100 lbs.	_____	_____	_____	_____

4. Worker can carry:

	Never	Occasional	Frequent	Continuous
a. Up to 5 lbs.	_____	_____	_____	_____
b. 6 - 10 lbs.	_____	_____	_____	_____
c. 11 - 20 lbs.	_____	_____	_____	_____
d. 21 - 50 lbs.	_____	_____	_____	_____
e. 51 - 100 lbs.	_____	_____	_____	_____

In a workday:

 Occasional =
up to 33%

 Frequent =
34% to 66%

 Continuous =
67% to 100%

5. Worker is able to:

	Never	Occasional	Frequent	Continuous
a. Bend	_____	_____	_____	_____
b. Squat	_____	_____	_____	_____
c. Crawl	_____	_____	_____	_____
d. Climb	_____	_____	_____	_____
e. Reach above shoulder level	_____	_____	_____	_____
f. Walk on uneven ground	_____	_____	_____	_____

6. Other functional limits or necessary modifications:

LIGHT DUTY JOB DESCRIPTION

Northwest Youth Corps has a **light duty**, Return-to-Work Program that places employees into temporary, transitional jobs that are safely within their medical restrictions. This program reduces employee wage loss, and helps prevent re-injury.

Notice to Physician: If the employee is unable to return to unrestricted duties please consider each of the following tasks for approval. The temporary, transitional position for this employee during recovery will be comprised of the approved tasks contained in the section below and on the previous page.

Crew Support:

- Making Sandwiches
- Cleaning Coolers
- Sweeping Van
- Filing Hand Tools
- Cooking Dinner
- Washing Dishes
- Filling Water Jugs

Can Do

Cannot Do

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Gathering Firewood

- Not to Exceed 10 Pounds
- Not to Exceed 25 Pounds
- Not to Exceed 50 Pounds

_____	_____
_____	_____
_____	_____

Walking to Work

- Not to exceed 1000 feet
- Not to exceed 2500 feet
- Not to exceed One mile
- Not to exceed Two miles
- Over Two miles

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Is a commute to the worksite within the physical capacities of the worker?

By commute we mean the worker tolerates driving a car, being a passenger in a car, or utilizing public transportation to travel to and from the worksite.

This job is at: _____

Transportation: _____

Commute approved

Commute not approved

Physicians' Signature

Date