City of Newport News

Certification of Health Care Provider for Return to Work

Employee's Name: _____ DOB: _____ Job Title: _____

To be completed by Physician

After reviewing the attached job description and the essential functions/physical demands for the positon held by the above employee please complete either (A) (B) or (C) as appropriate and sign and date below.

(A) The above named employee has been released to return to Full Duty as of _____ (Date) with **NO RESTRICTIONS** and can perform all essential functions for the employee's full position.

(B) The above named employee has been released to Partial Duty/Reduced Hours as of _____ (Date) and **CANNOT** perform their full work schedule. List hours and/or days: _____

(C) The above named employee has been released to return to work on _____ (Date) **WITH THE FOLLOWING RESTRICTIONS** and cannot perform all the essential functions for the employee's full position.

Check applicable boxes and provide limitations/restrictions:

☐ Lifting (Max weight)	_____ lbs.	☐ Walking	_____ hours per day
☐ Repetitive Lifting/Motion	_____ lbs.	☐ Standing	_____ hours per day
☐ Carrying Pushing/Pulling	_____ lbs.	☐ Sitting	_____ hours per day
☐ Pinching/Gripping	_____ lbs.	☐ Crawling	_____ hours per day
☐ Reaching over head	_____ lbs.	☐ Kneeling	_____ hours per day
☐ Reaching away from body		☐ Squatting	_____ hours per day
☐ No Driving		☐ Climbing	_____ hours per day

☐ Other Restrictions:

These limitations/restrictions are: ☐ Temporary ☐ Permanent

Duration of restrictions: Start Date _____ End Date _____

My signature indicates that I have read and understand the employee's job description and the listed tasks with the job description and that my findings are based on my medical assessment of this employee's physical capabilities as compared to the essential functions of the job.

Physician's Name : _____ Signature: _____ Date: _____

Provider's name and business address: _____

Type of practice / Medical speciality: _____

Telephone: ( ) _____ Fax: ( ) _____

(Revised 4-2018)