

Claim Number:

# Occupational Health Centers of Ill

544 W Dundee Road Ste A WHEELING, IL 60090  
Phone: (847) 419-6974 Fax: (847) 419-6982

Service Date: 08/01/2017

Case Date: 07/21/2017

## Physician Work Activity Status Report

Patient: Belcher, Donald T.

SSN: XXX-XX-8720

Address: 140 N. Jackson St.  
NORTH CHICAGO, IL 60064

Employer Location: Lake Region Medical-Wheelin Contact: Julia Spunt

Home: (847) 505-4596

Address: 140 E Hintz Rd  
Wheeling, IL 600906044

Role: Primary Contact  
Phone: (716) 759-5412 Ext.:

Work: Ext.:

Auth. by: David Schneider

Fax: (716) 759-5560

**This Visit:** Time In: 02:08 pm

Time Out: 02:26 pm

Visit Type: Recheck

Treating Provider: Daniel H. Shiba, MD

**Diagnosis:**

842 S66.911A STRAIN OF UNSP MUSC/FASC/TEND AT WRS/HND I  
R HAND, INIT-S66.911A

**Medications:**

- Dispensed Prescription Medication to Patient
- Dispensed Over-The-Counter Prescription
- Written Prescription given to Patient

**Patient Status:**

**Regular Activity - Released from care**

Return to regular duty on 08/01/2017

Remarks:

**Employer Notice:**

The prescribed activity recommendations are suggested guidelines to assist in the patient's treatment and rehabilitation. Your employee has been informed that the activity prescription is expected to be followed at work and away from work.

**Next Visit(s):**

**Patient Notice:** It is essential to your recovery that you keep your scheduled appointments, but should you need to reschedule or cancel your appointment, please contact the clinic. Thank you for your cooperation.