

Functional Progress Form

How can I help my patient regain function and return to work?

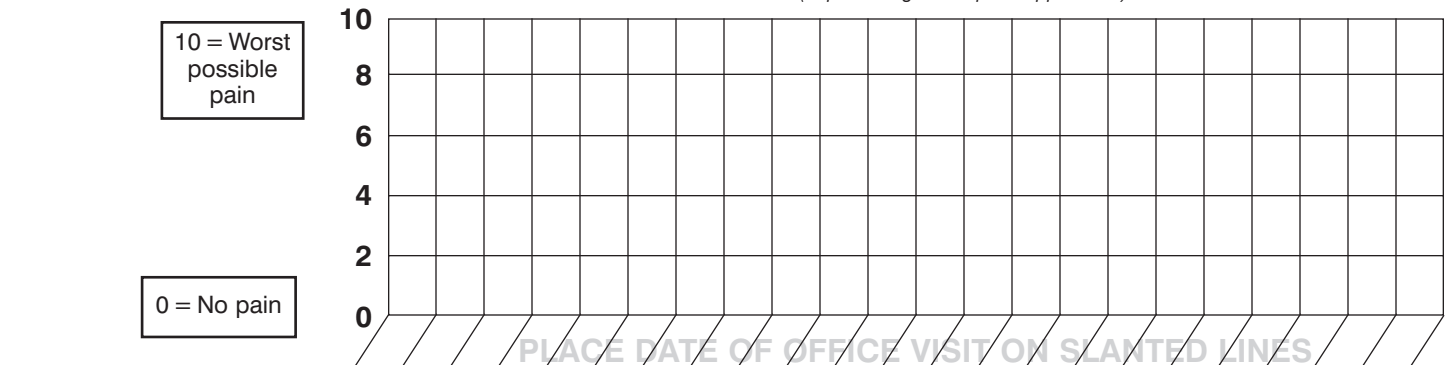
1. At each office visit, use this form to chart your patient's functional progress.
2. Speak with the employer (or potential employers) to explore light-duty and/or modified work.
3. **When your patient's progress has reached a plateau:** please consider a consult. Or, if you feel the patient has reached maximum medical improvement, please consider doing an impairment rating.

Patient name:	Date of injury	L&I Claim number
Employer Contact and phone:	Vocational Counselor and phone:	
Claim Manager and phone	Nurse Consultant and phone:	

For what diagnosis(es) are you using opioids?

Start date of treatment
/ /

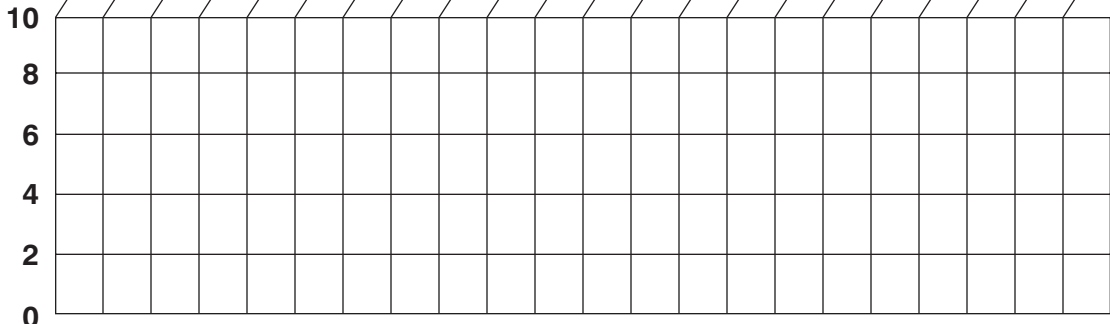
Graph 1: Pain Summary (When treating with opioids, this estimate is the answer to question #1 in "Opioid Progress Report Supplement")



10 = Level of function prior to injury

5 = Partially recovered function since injury

0 = Severe impact on function at home or work.



Graph 2: Functional Progress Summary (When treating with opioids, this estimate is the answer to question #6b in "Opioid Progress Report Supplement")