

EMPLOYEE WORK STATUS FORM

PATIENT'S NAME: _____ DEPT CODE: _____ EMPLOYEE ID # _____
 SHIFT TIME (start/end time): _____ SHIFT RDO: _____

DATE OF INJURY: _____ OFFICE VISIT DATE: _____ TIME IN: _____ TIME OUT: _____
 INITIAL INJURY TREATMENT Circle One: YES / NO SUPERVISOR: _____

INJURY EVALUATION

Diagnosis: _____

Treatment/Medications: _____

TRANSITIONAL DUTY AVAILABLE

To assist United Airlines in understanding our injured employee's current work limitations please indicate any physical restrictions so we can ensure proper light duty placement, if available. See reverse side for job function descriptions.

WORK STATUS:

- Return to work, Full Duty, without restrictions. Start date: _____
- Off work. Start date: _____ Re-eval date: _____
- Return to modified duty, restrictions below. Start date: _____ Re-eval date: _____
 - No lifting / carrying above ____ lbs
 - No push / pull above ____ lbs of force
 - No repetitive / prolonged squatting / kneeling / crawling
 - No Reaching - above shoulder (LEFT / RIGHT)
 - No Reaching (any direction overhead, in front or to side)
 - No repetitive / prolonged bending / twisting
 - No climbing / working at heights – circle LADDERS / STAIRS
 - No operating company equipment / vehicle
 - No food handling
 - No repetitive use of hand – circle LEFT / RIGHT
 - No standing / walking over ____ hrs per work shift (prescribed sedentary / sitting work)
 - No forceful / limited gripping - circle LEFT / RIGHT
 - Prescribed use of CANE / CRUTCHES / SPLINT / BRACE (circle)
 - Other _____

Additional Comments: _____

PHYSICIAN'S NAME: _____ PHONE: _____ FAX: _____

PHYSICIAN'S SIGNATURE: _____ SPECIALTY: _____ DATE: _____

PHYSICIAN'S ADDRESS: _____ CITY: _____ STATE: _____

DATE/TIME OF NEXT OFFICE VISIT: _____ ANTICIPATED MMI DATE: _____

**It is the employee's responsibility to submit this form to United immediately following each visit
 Employee Service Center – fax to 847-700-9533 -or-
 Submit document via Help Hub
 Contact your station business office immediately following visit for Trans Duty work assignment**

Job Descriptions/Functions for Full Duty

****Light Duty exists for all job groups below. We do have our light duty jobs categorized by mild, moderate and severe tasks, so we can accommodate most restrictions****

Customer Service Agent (Above the Wing)

- Lifting – frequent 5-50 lbs / occasional 50-99 lbs
- Bending – occasional from mid thigh height
- Open aircraft doors
- Stand and walk – constant
- Reaching in front – frequent
- Push / Pull – frequent 5-20 lbs / occasional 25-75 lbs

Ramp Service Agent (Below the Wing)

- Lift and Sort bags – frequent 5-50 lbs / occasional 25-99 lbs
- Drive tugs / carts
- Push / Pull – frequent 70-85 lbs
- Pull Chocks – frequent 5-25 lbs / occasional 15-75 lbs
- Walk, Stand, Sit – frequent
- Bend, Stoop, Squat, Crouch, Kneel – frequent
- Reach – Forward reach (frequent), Overhead reach (occasional)

Technical Ops (Maintenance)

- Climb Stairs/Ladders – occasional
- Push / Pull – occasional 5-100 lbs
- Reach (forward / overhead) – frequent
- Lifting – frequent 5-25 lbs / occasional 5-50 lbs
- Kneeling – frequent
- Bend, Stoop, Squat, Crouch – occasional
- Sit, Stand, Walk – frequent

Catering Operations (Food Preparation and Transportation)

- Stand – constant
- Bend, Kneel, Climb – occasional
- Walk, Sit – occasional
- Reach – Forward (frequent) / overhead (occasional)
- Lifting – frequent 5-25 lbs / occasional 40-60 lbs