



Attending Physicians Statement of Functional Capability

Last Name:	First Name:	MI:	Employee ID:
Home Address:	City:	State:	Zip:
Work Facility:		Work Phone:	
Job Title:		Job Category: (from page 2)	

TO BE COMPLETED BY TREATING PHYSICIAN

History and Statement of Physical and Medical Facts
Date symptoms first appeared or accident occurred: _____
Date patient ceased work: _____
Date of first visit: _____
Date of most recent examination: _____
Frequency of visits: _____
Medical facts affecting work ability:
Objective findings:
Present and future course of treatment:

Prescription Medication Disclosure Statement			
Department of Juvenile Justice employees shall be evaluated for potential interference with essential job functions. The medications include:			
<ul style="list-style-type: none"> ✓ Narcotics ✓ Sedatives and hypnotics ✓ Skeletal Muscle Relaxants 			
Medication	Dosage	Medication	Dosage

In order for us to evaluate the employee's ability to perform the essential functions of their job, given the prescription or usage of the above medication, I ask you, as the prescribing physician to review the above table and respond to the following

As the attending physician, I am familiar with the above employee's medical history and essential functions of his/her assigned duties. In my opinion, the prescribed medication: Will Will not

adversely affect the employees' ability to perform the essential functions of his/her employment.

Signature:	Date:
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Note: Stamped Signatures will not be accepted

Job Categories – job description must be attached

Category	Job Title	Descriptions	Essential Duties
Category 1: Sedentary	Business & Financial Operations Human Resources Principals & Teacher Juvenile Program Manager Counselor Social Service Provider/Coordinator I & II Director, Assistant & Associate Director Juvenile Probation/Parole Specialist I, II, & III	Primary sedentary, light physical work with limited to no unusual working conditions. Minimal travel required	<ul style="list-style-type: none"> • General office work, typing, filing, faxing, and answer telephones • Performs a variety of case management services to facilitate the rehabilitation of youthful offenders
Category 2: Active	Housekeeper/Groundskeeper Laundry Supply/Inventory/Warehouse Recreation Supervisor Craftsman/General Trades Activity Therapist Mechanic Investigator Mail Service Worker	Moderate to heavy physical activity in one or more major, consistent job duties, OR consistent exposure to working conditions that may interact with employee's medical or fitness condition. Physical activity may involve such things as heavy lifting, pushing or pulling; extended climbing, crawling or bending; and/or operation of potentially dangerous equipment. Working conditions may include such exposures as outside weather extremes, excessive heat or humidity; chemicals or solvents; explosives or combustibles; use of knives, drills or other sharp instruments. Minimal to moderate travel	<ul style="list-style-type: none"> • Cleans and straightens assigned areas • Collects, sorts, launders, transports and distributes linens and uniforms • Participates in making, marking, altering and mending of clothing, linens, and other items • Observes required safety precautions in disposing of contaminated refuse • Receives and counts items, and records data manually or using a computer • Unload shipments • Packs and unpacks items • Marks items using identification tags, stamps, electric marking tools, or other labeling equipment • Delivers and transports supplies • Order supplies to maintain stock
Category 3: Food Handling	Food Service Personnel	Positions involve food preparation or the handling of raw consumable animal products. Physical activities may involve such things as moderate lifting, pushing or pulling and operation of food service equipment. Moderate travel	<ul style="list-style-type: none"> • Prepares food, cleans, peels, slices and trims using manual and electrical appliances • Cleans work areas, equipment, utensils, dishes and silverware • Unpacks and stores supplies, raw and prepared food products • Conducts or assist with food supply requisitions and sanitation and maintenance inspections • Observes safety, sanitation and health rules and standards
Category 4: Health Related	Nurse Nurse Practitioner Physician Assistant Nurse Manager Dentist Dental Assistant Psychologist Psychiatrist	Health-related positions involving direct contact with or exposure to air/blood-borne pathogens, human body parts or products, or hazardous chemicals or radiation. Physical activities may involve such things as extended sitting, standing and walking, fine hand and motor control, bending, squatting and stooping, distinctive hearing, and visual attention, and ability to concentrate and make fine discriminations are critical. Minimal travel required	<ul style="list-style-type: none"> • Consults and coordinates with healthcare team members to assess, plan, implement and evaluate youth care plans • Maintains accurate, detailed reports and youth records • Prepares youth for, and assist with, examinations and treatments • Prepares rooms, sterilize instruments, equipment and supplies, and ensures that stock of supplies is maintained • Provides health care, first aid, and immunizations • Administers prescribed medications (oral, sublingual) or starts intravenous fluids, and notes times and amounts on youth charts • Perform CPR and for some sites, AED
Category 5: Law Enforcement	Juvenile Correctional Officer I & II Juvenile Correctional Lieutenant Juvenile Correctional Captain Juvenile Correctional Counselor I, II, & III Transportation Captain & Officer Public Safety Instructors & Training	Strenuous physical activity and/or extreme or potentially life-threatening working conditions requiring a high level of physical capability. Physical activities may involve such things as approved offensive and defensive control measures. Normal to extreme travel	<ul style="list-style-type: none"> • Oversees offenders conduct and behavior during work assignments, meals, and recreation periods to prevent disturbances and escapes • Inspects, inventories, maintains physical control of logs, keys, tools, and related equipment • Takes youth in custody and escort to locations within and outside the facility • Guards facility entrances in order to screen visitors • Inspects vehicles entering and leaving facility • Maintains order, discipline, and security within assigned areas in accordance with relevant rules, regulations, policies and laws • Responds to emergencies • Transportation of youth

Physical Capabilities

Circle the number of hours the employee can perform the particular task:

Sit	1	2	3	4	5	6	7	8	9	10	11	12	Not Restricted
Stand	1	2	3	4	5	6	7	8	9	10	11	12	Not Restricted
Walk	1	2	3	4	5	6	7	8	9	10	11	12	Not Restricted

Employee needs to alternate between sit/stand every _____ minutes/hours

Employee injured on the Right Side Left Side Both Sides

Check the amount of time the injured worker is able to perform the particular task:

	Never	Occasionally <33%	Frequently 33-66%	Continuously 67-100%	N/A
Operate motorized vehicle					
Hand/Wrist Work					
Grasping					
Pushing/pulling					
Fine manipulation					
Repetitive movement of hand					
Repetitive movement of foot					
Reach above shoulder					
Bend/twist					
Kneel/squat/stoop					
Climb stairs					
Lift/carry 1-10 lbs.					
Lift/carry 11-20 lbs.					
Lift/carry 21-49 lbs.					
Lift/carry > 50 lbs.					
No assaultive or physical measures					
Typing, keyboarding, data entry					

Does the employee have work hour limitations? No Yes. If yes, total number of hours per day the employee may work _____

Indicate below if you have additional information relevant to the employee's work ability. Please refer to the attached job description and if necessary, discuss with employee.

Disability Evaluation

Projected date employee can return to full and unrestricted duties:

	For Current Position	For Any Position
Is employee now totally disabled?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "No," when was patient able to resume work activities?	Date able to resume work activities:	Date able to resume work activities:
If "Yes," when will employee be able to resume work activities?	Date: _____ <input type="checkbox"/> Indefinite <input type="checkbox"/> Never <input type="checkbox"/> Cannot Determine	Date: _____ <input type="checkbox"/> Indefinite <input type="checkbox"/> Never <input type="checkbox"/> Cannot Determine

Progress Evaluation

	YES	NO
Recovered	<input type="checkbox"/>	<input type="checkbox"/>
Improved	<input type="checkbox"/>	<input type="checkbox"/>
Unimproved	<input type="checkbox"/>	<input type="checkbox"/>
Regressed	<input type="checkbox"/>	<input type="checkbox"/>

Released To

Full and unrestricted duty: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____
Modified duty with identified restrictions: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____

Physician's Information

Printed Name:	Board Certified Specialty:
Street Address:	
City / State / Zip:	Phone #: ()
Signature:	Date:
Person Completing Form:	Title:

Note: Stamped Signatures will not be accepted