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C1457

**NOTICE TO HEALTH CARE PROVIDER
 FITNESS FOR WORK**

Company Name: _____
 Company contact name: _____ Phone: _____

_____ is committed to doing everything we can to achieve a successful recovery and return to work for our injured employees. Our disability management program is designed to help them return to work safely and at the earliest opportunity, using appropriate modified work alternatives when required.

Please complete the fitness-for-work section (in the box below) at the time of treatment.
Our employee will return it to us and we will pay the form completion fee.

Authorization to Release Information (to be completed by injured employee)

Injury: _____ Injury Date: _____

I hereby authorize my treating health care provider to release information related to my fitness for work.

Employee's Name: _____

Date: _____

Employee's Signature: _____

Fitness for Work (to be completed by treating health care provider)

Examination Date: _____	Injury: _____		
This worker is:	not capable of any work _____ for how long?		
	fit for regular work, no restrictions		
	fit for modified work with the following recommendations:		
Specific fitness recommendations and physical restrictions (see over for guidelines):			
Sedentary	Light	Medium	Heavy
Estimated date fit for regular work: _____	Next appointment: _____		
Payment address: _____			
Health care provider's name: _____			
Health care provider's signature: _____			

Work Capabilities

Sedentary work - Exerting up to 5 kg (11 lbs.) of force. Example: An occupation where the worker sits most of the time, and only walks or stands for brief periods.

Light work - Exerting up to 10 kg (22 lbs.) of force. Example: Walking or standing to a significant degree or sitting constantly but with arm and/or leg controls with exertion of force greater than limited.

Medium work - Exerting up to 20 kg (44 lbs.) of force.

Heavy work - Exerting over 20 kg (44 lbs.) of force.

When determining a worker's fitness for work and suitability for a position, you need to also consider the frequency at which the task is performed. For example, if a worker's regular job duties require them to lift 11 kg (medium level) from their waist to an overhead position on a frequent basis, but they are only able to lift 11 kg on an occasional basis, this would be considered a work restriction.