



This form contains your diagnosis.

RIZVI, SAQIB SYED (M.D.)
601 Van Ness Avenue
San Francisco CA 94102-3200
415-833-2000

Patient Name: Churchill, August

Patient MRN: 110004212027

Encounter Date & Time: 9/13/2019 11:20 AM

Please see below for this health care provider's directives and information relating to this encounter.

Industrial Work Status Report

Date of Injury: 8/19/2019

Claim #:

Next Appointment Date: 10/2/2019

DIAGNOSIS: LUMBAR MUSCLE STRAIN, SUBSEQ

Full Duty:

The patient was evaluated and deemed able to return to work at full capacity on 9/13/2019.

Concurrent Treatment:

PT/OT.

This form has been electronically signed and authorized by RIZVI, SAQIB SYED (M.D.)

*This form contains your private health information that you may choose to release to another party;
please review for accuracy.*