

UW Medicine

Eastside Specialty Center – Shoulder and Elbow Team
1700 116th Ave NE / Bellevue, WA / 425-646-7777

Patient Name: _____

Patient Claim#: _____

Patient U#: _____

To Whom It May Concern:

_____ was seen in the Bone and Joint Surgery Center on _____
for _____.

The patient

May return to work/school on _____ (Date)

Full duty-no restrictions

Modified duty with the following restrictions: _____

May not return to work/school until the following date: _____

The patient should return for clinic evaluation: _____

Physician's Signature _____

Physician's Name (Please Print) _____