

Physiotherapy/ Occupational Therapy Progress Report - Form B

WSCC Claim Number

Worker Information							
Last Name	First Name		Middl	e Initial	Date of Birth YY	MM DD mm dd	
Date of Injury YY MM DD	Is the worker working?						
yy ' mm ' dd '	Yes No If yes, describe: Modified duties Pre-injury work						
Case Conference scheduled?							
Yes Date (yy/mm/dd) YY MM DD	lo Reason:						
Summary							
Current/Reassessment Date YY MM DD		Number of Treatments Ov		verall Functional Progress			
yy ' mm ' dd	Imj		Improving	nproving No change Declining			
Comments							
	,						
Health Care Provider Information							
Provider Name					Practitioner ID Number		
Practitioner Name		Phone			Fax		
				ļ			
Injury Assessment Information							
Medical Disability Advisor (MDA) Diagnosis (sp	pecify body part)						
Diagnosis Change	Sprain/Strain			Disability Duration Guidelines YY MM DD			
Yes No No	Yes 🗌 No 🗌			yy ' mm ' dd			
Form C – Functional Abilities Report attached	?						
Yes ☐ No ☐ If no, why?							
Are there flags/indicators that influence duration	on?						
Yes No No							
Expected Return to Work	d	VV	mm do	d			
Modified Duties Start Date YY MM D	□ □ Pre-injury D	uties Start Date YY	MM DI				
Job Match Summary							
Pre-injury Job Requirements							
Sedentary Light Medium He	avy 🗌 Very Heavy [
Present Work Capability							
Sedentary Light Medium He	avy 🔲 Very Heavy [□ N/A □					
Modified Duties		_					
Sedentary Light Medium He	avy 🔲 Very Heavy [

Collaborative Treatment Plan

Goals/Methodology	Progress Related to Goals	Recommended Time Frame		
		From	YY MM DD yy mm dd	
			yy mm dd	
		То	YY MM DD	
			yy mm dd	
		From	YY MM DD yy mm dd	
			,,	
		То	YY MM DD	
			yy mm dd	
		From	YY MM DD	
		FIOIII	yy mm dd	
		То	YY MM DD yy mm dd	
			yy mm dd	
Additional Requests/Recommendations				
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The WSCC may use this information for the administration of legislation under our authority, including the *Workers' Compensation Acts*, the *Safety Acts*, and/or the *Mine Health and Safety Acts*, and their associated *Regulations*, and to contact you in relation to the requirements under the relevant legislation. It is your responsibility when providing an email address to ensure reasonable safeguards are in place to protect the confidentiality and security of your personal information within your email account.

Head Office: Box 8888 • Yellowknife, NT X1A 2R3 • Telephone: (867) 920-3888 • Toll Free: 1-800-661-0792 • Fax: (867) 873-4596 • Toll Free Fax: 1-866-277-3677

Box 669 • Iqaluit, NU X0A 0H0 • Telephone: (867) 979-8500 • Toll Free: 1-877-404-4407 • Fax: (867) 979-8501 • Toll Free Fax: 1-866-979-8501