

Certificate For Return to Work/School

Name: Amanda Brasington

Was seen on 4/20/18 at 1000 am/pm

and is able to return to work/school on: 4/23/18

Nature of illness or injury: _____

☐ Restrictions: _____

☐ Restricted Physical Exertion: _____

☐ Light Work: _____

☐ Avoid _____ for _____
number of days

☐ Limited Physical Exertion: _____

☐ Other: _____

CRNP

RN:

M. H. O. CRNP

Date:

4/20/18

Phone (334) 244 - 3281

Fax (334) 244 - 3243