

# Functional Capacity Evaluation

October 10, 1997

**Patient's Name:** Mary Doe **Eval Date:** October 9, 1997

**Global Effort Rating:** Reliable      Questionable      Unreliable

**Primary Limiting Factor:** Self-reported global symptomatic responses to activity that are reported to be minimally task specific and non-responsive to symptom control measures.

**Current Symptom Reports**

Usual Pain Frequency:	Occasional	Intermittent	Frequent	<u>Constant</u>
Usual Pain Severity:	Minimal	Slight	<u>Moderate</u>	Severe
Worst Pain Frequency:	<u>Occasional</u>	Intermittent	Frequent	Constant
Worst Pain Severity:	Minimal	Slight	<u>Moderate</u>	Severe

**Perceived Job Demands / Abilities (refer to chart on next page)**

PDC Job Level:		Sedentary	Light	<u>Medium</u>	Heavy	Very Heavy
Abilities Level (SFS):	Below Sedentary	<u>Sedentary</u>	Light	Medium	Heavy	Very Heavy

**Measured Function**

Cardiovascular Fitness (YMCA)..... 90th percentile

Lateral Pinch (B&L)..... Right 16 lbs CV 1%      Left 14 lbs CV 1%

Power Grip (Jamar Span 2) ..... Right 83 lbs CV 2%      Left 92 lbs CV 3%

Standing Range of Motion

Eye Level..... Able

Stoop to Knee ..... Slightly Restricted

Crouch to Knee..... Slightly Restricted

Kneel to Knee..... Slightly Restricted

Infrequent Lift (ELC) ..... Waist > Shoulder 20 lbs      Floor > Waist 20 lbs      Floor > Shoulder 15 lbs

Bilateral Carry x 100 feet ..... 15 lbs

Bilateral Climb x 10 feet .....Deferred

**Assessment:**

<b>Job Demand</b>	<b>Perceived Demand</b>	<b>Perceived Ability</b>	<b>Tested Ability</b>
Sitting	45 min; 3 hrs/shift	30 min w SRA *	40 min w SRA *
Standing	40 min; 2 hrs/shift	30 min w SRA *	30 min w SRA *
Walking	60 min; 3 hrs/shift	WNL	WNL
Carrying < 20 lbs	30 min; 3 hrs/shift	Unable	Unable
Carrying > 20 lbs	30 min; 2 hrs/shift	Unable	Unable

**Summary:**

Patient's subjective status corresponds with objective findings:    yes    no

Patient's perception of ability to perform functional activities has improved:    yes    no    not available

Patient's functional abilities have improved:    yes    no    not available

**Comments:**

Ms. Doe globally limits her participation in work activities as a function of whether or not she will have a painful response to activity. She demonstrates fluid movements through full ranges of motion. She demonstrates excellent body mechanics, except when attempting to lift from the floor with a tight skirt, which she reports is required at work. She she has not yet learned symptom control strategies that can be used in a work setting.

Ms. Doe appears to have good potential to improve and to develop strategies for symptom negotiation. She appears to be motivated to return to work as a Flight Attendant for No-Name Airlines, although she has begun to have doubts that this will be possible. Her physical therapy program should include strategies for symptom negotiation, which can be achieved in a work environment. She should vigorously pursue work conditioning to improve lift capacity. At the present time, she is lifting only 13% of her body weight; 32% is considered normal for her age. If she is to return to work, based on the job description, she will need to lift at a super-normal level, approximately 62% of her body weight. If she achieves this level for lifting, the pushing and pulling demands of this job will be acceptable. Ms. Doe should be re-tested in three weeks to ascertain her progress. At that time, we can perform a brief work simulation to determine what shortfalls, if any, will be found as she returns to work.

Thank you for the opportunity to provide this service. This report represents a distillation of the findings of this functional capacity evaluation. Additional detail is available by request. Please contact either of the undersigned.

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Manager, Work Performance Laboratory

Leonard N. Matheson, PhD, CVE (314) 286-1605  
Director, Work Performance Laboratory  
Washington University School of Medicine Program in Occupational Therapy

<b>PHYSICAL DEMAND LEVEL</b>	<b>OCCASIONAL</b> 0 - 33% of the workday	<b>FREQUENT</b> 34 - 66% of the workday	<b>CONSTANT</b> 67 - 100% of the workday	<b>Typical Energy Required</b>
<b>SEDENTARY</b>	10 lbs.	Negligible	Negligible	1.5 - 2.1 METS
<b>LIGHT</b>	20 lbs.	10 lbs. and/or Walk/Stand/Push/Pull of Arm/Leg controls	Negligible and/or Push/Pull of Arm/Leg controls while seated	2.2 - 3.5 METS
<b>MEDIUM</b>	20 to 50 lbs.	10 to 25 lbs.	10 lbs.	3.6 - 6.3 METS
<b>HEAVY</b>	50 to 100 lbs.	25 to 50 lbs.	10 to 20 lbs.	6.4 - 7.5 METS
<b>VERY HEAVY</b>	Over 100 lbs.	Over 50 lbs.	Over 20 lbs.	Over 7.5 METS

\* Symptomatic response to activity

# Functional Capacity Evaluation

November 6, 1997

**Patient's Name:** Mary Doe **Eval Date:** October 30, 1997

**Global Effort Rating:** Reliable      Questionable      Unreliable

**Primary Limiting Factor:** Self-reported global symptomatic responses to activity

**Current Symptom Reports**

Usual Pain Frequency:	Occasional	Intermittent	Frequent	<u>Constant</u>
Usual Pain Severity:	Minimal	Slight	<u>Moderate</u>	Severe
Worst Pain Frequency:	<u>Occasional</u>	Intermittent	Frequent	Constant
Worst Pain Severity:	Minimal	Slight	<u>Moderate</u>	Severe

**Perceived Job Demands / Abilities (refer to chart on next page)**

PDC Job Level:		Sedentary	Light	<u>Medium</u>	Heavy	Very Heavy
Abilities Level (SFS):	Below Sedentary	Sedentary	<u>Light</u>	Medium	Heavy	Very Heavy

**Measured Function**

Cardiovascular Fitness (YMCA)..... 90th percentile  
 Infrequent Lift (ELC) .....Waist > Shoulder 30 lbs      Floor > Waist 20 lbs      Floor > Shoulder 25 lbs  
 Percent Improvement .....Waist > Shoulder 50%      Floor > Waist Even      Floor > Shoulder 67%  
 Bilateral Carry x 100 feet .....25 lbs

**Assessment:**

Job Demand	Perceived Demand	Perceived Ability	Tested Ability
Sitting	45 min; 3 hrs/shift	30 min w SRA *	40 min w SRA *
Standing	40 min; 2 hrs/shift	30 min w SRA *	30 min w SRA *
Walking	60 min; 3 hrs/shift	WNL	WNL
Carrying < 20 lbs	30 min; 3 hrs/shift	WNL	WNL
Carrying > 20 lbs	30 min; 2 hrs/shift	Unable	Adequate load

**Summary:**

Patient's subjective status corresponds with objective findings: yes    no  
 Patient's perception of functional ability has improved: yes    no    not available  
 Patient's functional abilities have improved: yes    no    not available

**Comments:**

Ms. Doe continues to globally limit her participation in work activities and her exercise program as a function of whether or not she will have a painful response to activity. In the interval since the last test date (10/10/97), she withdrew from physical therapy and her exercise program for 10 days in order to attempt symptom control after exacerbation during a physical therapy evaluation, but was not successful. She has since returned to the program and has resumed her exercises.

In testing today, Ms. Doe demonstrates improvements in both lift capacity and self-perception of her work capacity, although she is not confident in her ability to apply this in a work setting on a regular full-time basis. At the present time, she is lifting 22% of her body weight, a substantial improvement since the last evaluation;

32% is considered normal for her age. She also demonstrates difficulties with handling simulated work activities, principally lifting objects above waist level, as if to overhead luggage racks. Carrying capacity is also less than necessary for a return to work.

Ms. Doe continues to have good potential to improve and to develop strategies for symptom negotiation. Her work hardening program should include conditioning for work related tasks, combined with strategies for symptom negotiation. She should also be assisted to develop strategies for manipulating the equipment she will have to handle on the job. We undertook some of this during the evaluation and it appears that she both appreciated and benefited from this instruction. Ms. Doe should be re-tested in three weeks to ascertain her progress. At that time, we will again perform a lift capacity test and a work simulation to determine her status for return to work.

Thank you for the opportunity to provide this service. This report represents a distillation of the findings of this functional capacity evaluation. Additional detail is available by request. Please contact either of the undersigned.

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<b>PHYSICAL DEMAND LEVEL</b>	<b>OCCASIONAL</b> 0 - 33% of the workday	<b>FREQUENT</b> 34 - 66% of the workday	<b>CONSTANT</b> 67 - 100% of the workday	<b>Typical Energy Required</b>
<b>SEDENTARY</b>	10 lbs.	Negligible	Negligible	1.5 - 2.1 METS
<b>LIGHT</b>	20 lbs.	10 lbs. and/or Walk/Stand/Push/Pull of Arm/Leg controls	Negligible and/or Push/Pull of Arm/Leg controls while seated	2.2 - 3.5 METS
<b>MEDIUM</b>	20 to 50 lbs.	10 to 25 lbs.	10 lbs.	3.6 - 6.3 METS
<b>HEAVY</b>	50 to 100 lbs.	25 to 50 lbs.	10 to 20 lbs.	6.4 - 7.5 METS
<b>VERY HEAVY</b>	Over 100 lbs.	Over 50 lbs.	Over 20 lbs.	Over 7.5 METS

\* Symptomatic response to activity

# Functional Capacity Evaluation

November 21, 1997

Patient's Name: **Mary Doe** Eval Date: **November 20, 1997**

Global Effort Rating: Reliable Questionable Unreliable

Primary Limiting Factor: Self-reported global symptomatic responses to activity

## Current Symptom Reports

Usual Pain Frequency:	Occasional	<u>Intermittent</u>	Frequent	Constant
Usual Pain Severity:	Minimal	<u>Slight</u>	Moderate	Severe
Worst Pain Frequency:	<u>Occasional</u>	Intermittent	Frequent	Constant
Worst Pain Severity:	Minimal	Slight	<u>Moderate</u>	Severe

## Perceived Job Demands / Abilities (refer to chart on next page)

PDC Job Level:		Sedentary	Light	<u>Medium</u>	Heavy	Very Heavy
Abilities Level (SFS):	Below Sedentary	Sedentary	Light	<u>Medium</u>	Heavy	Very Heavy

## Measured Function

Cardiovascular Fitness (YMCA)..... 90th percentile

Infrequent Lift (ELC) .....Waist > Shoulder 50 lbs Floor > Waist 60 lbs Floor > Shoulder 45 lbs

Percent Improvement .....Waist > Shoulder 67% Floor > Waist 200% Floor > Shoulder 80%

Bilateral Carry x 100 feet .....45 lbs

## Assessment:

Job Demand	Perceived Demand	Perceived Ability	Tested Ability
Sitting	45 min; 3 hrs/shift	60 min	No reported SRA*
Standing	40 min; 2 hrs/shift	60 min	60 min
Walking	60 min; 3 hrs/shift	WNL	WNL
Carrying < 20 lbs	30 min; 3 hrs/shift	WNL	WNL
Carrying > 20 lbs	30 min; 2 hrs/shift	WNL	WNL

## Summary:

Patient's subjective status corresponds with objective findings: yes no  
Patient's perception of functional ability has improved: yes no not available  
Patient's functional abilities have improved: yes no not available

## Comments:

Ms. Doe no longer globally limits her participation in work activities and her exercise program as a function of whether or not she will have a painful response to activity. In the interval since the last test date (10/30/97), she participated regularly in a work hardening program 3.5 hours per day.

In testing today, Ms. Doe demonstrates substantial improvements in both lift capacity, carry capacity, and self-perception of her work capacity. She believes that she is ready to return to work on a regular full-time basis. At the present time, she is lifting 40% of her body weight, a substantial improvement since the last evaluation; 32% is considered normal for her age. She also demonstrates competence with handling simulated work activities, including lifting objects above waist level, as if to overhead luggage racks. Carrying capacity is also adequate for a return to work.

Thank you for the opportunity to provide this service. This report represents a distillation of the findings of this functional capacity evaluation. Additional detail is available by request. Please contact the undersigned.

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<b>PHYSICAL DEMAND LEVEL</b>	<b>OCCASIONAL</b> 0 - 33% of the workday	<b>FREQUENT</b> 34 - 66% of the workday	<b>CONSTANT</b> 67 - 100% of the workday	<b>Typical Energy Required</b>
<b>SEDENTARY</b>	10 lbs.	Negligible	Negligible	1.5 - 2.1 METS
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\* Symptomatic response to activity