Physiotherapy/ Occupational Therapy Initial Assessment – Form A

Date of Assessment	YYYY	MM	DD

WSCC Claim Number

Worker Information

Last Name	First Name		Middle Initial	Date of Birth YYYY	MM	DD
Family Physician Name	Date of Injury YYYY MM DD Is the worker w			working?		
				Pre-injury work Modified duties No		

Health Care Provider Information

Provider Name	Practitioner ID Number		
Practitioner Name	Phone	Fax	

Employer Information

Employer Name	Employer Contact Name	Employer contacted?
		Yes 🔲 No 🗌
Worker's Job Title/Occupation	Job task information available?	Modified duties available?
	Yes 🔲 No 🗌	Yes 🔲 No 🗌

Injury Assessment Information

Medical Disability Advisor	(MDA) Diagnosis (specify body	part)					
Sprain/Strain Yes No D	Date of First Contact YYYY	MM DD	Expected reco	very based on MDA	YYYY	MM	DD
Significant Subjective			Significant Objective				
	Form C – Functional Abilities Report? Yes No I If no, why?						
	Are there flags/indicators that influence duration? Yes No I If yes, explain:						
Expected Return to Work YYYY MM DD YYYY MM DD Modified Duties Start Date Pre-injury Duties Start Date DD DD DD							
Case conference required? Attach additional page if necessary. Yes No							
Job Match Summary							
Pre-injury Job Requirements Sedentary Light Medium Heavy Very Heavy							
Present Work Capability Sedentary Light Medium Heavy Very Heavy N/A							
Modified Duties Sedentary 🗌 Light 🗌 Medium 🗌 Heavy 🗌 Very Heavy 🗌							

Collaborative Treatment Plan

Goals	Methodology	Recommended Time Frame		
		From YYYY MM DD		
		To YYYY MM DD		
		From YYYY MM DD		
		To YYYY MM DD		
		From YYYY MM DD		
		To YYYY MM DD		
Additional Requests/Recommendations				

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.

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