



CHOI, JOAN GABRIELLE (M.D.)
25965 S NORMANDIE AVE
HARBOR CITY CA 90710-3416
310-325-5111

Patient Name: Darsot, Imtiaz Ibrahim
Encounter Date & Time: 11/18/23 3:05 PM

Please see below for this health care provider's directives and information relating to this encounter.

Work Status Report

Date onset of condition: 03/28/23
Next Appointment Date:

Off Work

This patient is placed off work from 11/18/2023 through 11/20/2023

Full Duty:

The patient was evaluated and deemed able to return to work at full capacity on 11/21/2023

This form has been electronically signed and authorized by CHOI, JOAN GABRIELLE (M.D.)

This form contains your private health information that you may choose to release to another party, therefore please review for accuracy.