Relationships at Work, Inc. with Dr. Debra Dupree
755 F Avenue, Coronado, CA 92118
dr.dupree@relationships-at-work.com • www.relationships-at-work.com • 619-417-9690

# Request for Interactive Process Facilitator

| | | | |
|---|---|---|---|
| Date Rcvd by Dr. D. Dupree | | Claims Representative | |
| Employer | | Claim Rep's Phone No. | |
| Employer's Address | | | |
| Contact Person | | Phone and/or email | |

**Injured Worker**

| | | | |
|---|---|---|---|
| Injured Employee'ss Name | | Injured Employee's Phone | |
| Injured Employee's Address | | | |
| Claim Number | | Date of Birth | |
| Date of Injury | | If CT, Dates included | |
| Body Part/s | | | |
| Occupation | | Working Now? | **Yes** ☐ No ☐ |

**Medical Information**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| P&S Report Date | | | P&S Doctor's Name | | | | |
| P&S Dr.'s Address | | | | | | | |
| P&S Dr.'s Phone No. | | | | | | | |
| Is the above Doctor: | PTP | ☐ | QME | ☐ | AME | ☐ | |
| Work Restriction/s Return to work | | | | | | | |

**Attorneys**

| | | | |
|---|---|---|---|
| Defense Attorney | | Applicant Attorney | |
| Address | | Address | |
| City/State/Zip | | City/State/Zip | |
| Phone | | Phone | |

| | | | |
|---|---|---|---|
| Comments/Special Instructions | | | |
| Interpreter Needed | **Yes** ☐ **No** ☐ | Date form completed | |