

**1 Patient Information****1 PATIENT DETAILS****Name**  
Rachel M. Donovan**DOB**  
09/28/1991**Age / Sex**  
34 / Female**MRN / Patient ID**  
NSA-2026-4471**Date of Evaluation**  
05/06/2026**Provider**  
Dr. Michael T. Ruiz, MD — General Surgery**Facility / Clinic Name**  
Northside Surgical Associates, Atlanta, GA**P Purpose of Certificate****2 REASON FOR ISSUANCE**

This medical certificate is issued to confirm that Ms. Rachel M. Donovan underwent an acute surgical condition requiring a period of medical leave from her employment as a registered nurse at Grady Memorial Hospital, Atlanta, GA. This document is provided for submission to her employer's Occupational Health and Human Resources departments to support her medical leave claim, modified duty accommodation request, and return-to-work planning. It has been prepared at the patient's request and authorization.

**CE Clinical Encounter****3 ENCOUNTER DETAILS**

In-person post-operative outpatient follow-up conducted on 05/06/2026 — post-operative day 10 — at Northside Surgical Associates clinic, Atlanta, Georgia. Ms. Donovan was evaluated by Dr. Michael T. Ruiz, MD, FACS, the attending general surgeon who performed her procedure. The evaluation included inspection of all three laparoscopic port sites, abdominal palpation, pain and activity assessment, functional capacity review, and discussion of return-to-work parameters. Staple removal was performed today.

**D Medical Condition / Diagnosis****4 RELEVANT DIAGNOSIS OR CONDITION**

Primary Diagnosis: Acute appendicitis without perforation — ICD-10 K37. Procedure: Laparoscopic appendectomy performed 04/26/2026 at Northside Medical Center under general anesthesia; operative time 42 minutes. No intraoperative complications. Pathology confirmed acute suppurative appendicitis without perforation or necrosis. Hospital discharge: 04/28/2026 (2-day inpatient stay). Post-operative course uncomplicated to date.

**CF Clinical Findings****5 PERTINENT FINDINGS SUPPORTING CERTIFICATION**

Post-operative day 10 findings: All three laparoscopic port sites (12mm umbilical, 5mm right lower quadrant x2) are healing without signs of infection, dehiscence, seroma, or erythema. Staples removed today; Steri-strips applied. Abdomen: soft, non-distended, non-tender to palpation; no guarding or rebound. Bowel function fully restored since POD 3 — tolerating normal diet without difficulty. Pain: 2/10 at rest; increases to 4/10 with bending, core engagement, or lifting activities. Fatigue is present — patient self-reports approximately 60–65% of pre-operative energy level with functional decline after 4–5 hours of activity. Ambulation: fully independent. No fever since POD 2. No nausea, vomiting, wound drainage, or urinary complaints. Current analgesia: acetaminophen 500mg PO PRN only (opioids discontinued POD 3).

## MR Medical Recommendation

### 6 PROVIDER RECOMMENDATION

Ms. Donovan is recovering appropriately from her laparoscopic appendectomy but is not yet medically cleared for her full nursing duties, which require prolonged standing (up to 12-hour shifts), heavy patient lifting/transfers (up to 50 lbs), and physically demanding bedside care. She is cleared for a modified light-duty return beginning 05/11/2026 subject to the restrictions enumerated below. Full unrestricted return to work is anticipated on 05/20/2026, contingent on satisfactory findings at her 3-week post-operative evaluation. Employer is requested to accommodate light administrative, care coordination, or desk-based nursing assignments during the modified period.

- |  |  |
|--|--|
| <input type="checkbox"/> Excuse from work / school / regular duties          | <input type="checkbox"/> Need for rest, treatment, or recovery period      |
| <input checked="" type="checkbox"/> Modified duties or activity restrictions | <input checked="" type="checkbox"/> Accommodations or limitations required |
| <input type="checkbox"/> Fitness to return to work / school                  | <input type="checkbox"/> Other (specify in recommendation above)           |

## ED Effective Dates

### 7 CERTIFICATION PERIOD

**Start Date (full medical leave)**  
04/26/2026 — date of surgery

**End Date (full leave)**  
05/10/2026

**Modified Duty Return Date**  
05/11/2026

**Full Unrestricted Return (estimated)**  
05/20/2026 — pending 3-week post-op clearance

## RL Restrictions / Limitations

### 8 MEDICALLY NECESSARY RESTRICTIONS — MODIFIED DUTY PERIOD 05/11-05/19/2026

1. No lifting > 10 lbs. 2. No direct patient lifting, transferring, or repositioning. 3. No pushing/pulling heavy equipment (beds, crash carts, medication dispensing carts). 4. Reduced continuous standing — maximum 2 hours without seated rest break. 5. No participation in code team or rapid response physical activities. 6. Light administrative, triage, care coordination, or documentation duties only. 7. No strenuous abdominal core engagement. 8. No travel requiring continuous sitting >4 hours without movement breaks. These restrictions are consistent with standard post-laparoscopic surgery recovery guidelines (Society of American Gastrointestinal and Endoscopic Surgeons, 2024).

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|---|--|
| <input checked="" type="checkbox"/> No heavy lifting                | <input checked="" type="checkbox"/> Work / school modifications required |
| <input checked="" type="checkbox"/> Reduced standing or walking     | <input type="checkbox"/> Travel limitations                              |
| <input checked="" type="checkbox"/> Avoidance of strenuous activity | <input type="checkbox"/> No restrictions indicated                       |

## FU Follow-Up

### 9 FOLLOW-UP REQUIREMENT

3-week post-operative follow-up is scheduled for 05/20/2026 at Northside Surgical Associates. At that visit, Dr. Ruiz will assess wound healing, pain resolution, fatigue and functional capacity, and will determine medical clearance for full unrestricted nursing duty. If symptoms worsen before that date — including new or increasing abdominal pain, fever >100.4°F, wound site changes (redness, swelling, drainage), inability to tolerate oral intake, or any other concerning symptoms — Ms. Donovan is instructed to seek evaluation promptly and not return to work until re-evaluated.

## CN Confidentiality Note

### 10 PRIVACY NOTICE

This certificate contains only the minimum necessary medical information required for its stated purpose — workplace medical leave and modified duty accommodation — and is issued consistent with HIPAA and applicable Georgia state privacy law. Disclosure of this document beyond the patient's employer HR and Occupational Health departments requires separate written patient authorization. The specific surgical diagnosis disclosed herein was authorized for release by the patient.

PHYSICIAN / PROVIDER NAME  
Michael T. Ruiz, MD

CREDENTIALS  
MD, FACS — General Surgery

LICENSE NUMBER  
GA-MD-049812

FACILITY / CLINIC NAME  
Northside Surgical Associates, Atlanta, GA

DATE

05/06/2026

TIME

10:45 AM

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