



Danton S. Dungy, M.D.

Disability Forms

Any disability forms given to the Dungy Orthopedic Center to be completed by the medical providers will take **7-10 business days** and incur a **\$40 charge for each set.**

Please answer the following questions to better help us fill out your forms:

1. Type of Surgery/Injury: _____

2. Date of Surgery/Injury: _____

3. Job Title: _____

4. Amount of Time Off Being Requested: _____

5. Return to Work Date: _____

6. Fax Number to Send Forms: _____

Please sign below acknowledging that you have read and understand our disability form policy.

Print Name: _____

Signature: _____ Date: _____