

Example
(THIS IS A "US POSTAL SERVICE" DOCUMENT)
("546 Worksheet")

Date: _____ Facility: _____

Injured Employee Name: _____ Date of Injury _____

Postal Manual Reference: ELM 546.142

When an employee has partially overcome the injury or disability, the Postal Service has the following obligation:

Current Employees. When an employee has partially overcome a compensable disability, the Postal Service must make every effort toward assigning the employee to limited duty consistent with the employee's medically defined work limitation tolerance (see 546.611). In assigning such limited duty, the Postal Service should minimize any adverse or disruptive impact on the employee. The following considerations must be made in effecting such limited duty assignments:

- (1) To the extent that there is adequate work available within the employee's work limitation tolerances, within the employee's craft, in the work facility to which the employee is regularly assigned, and during the hours when the employee regularly works, that work constitutes the limited duty to which the employee is assigned.

I certify that every effort was made to identify an assignment for this employee with either a limited duty or rehabilitation assignment (if appropriate) in the employee's regularly assigned craft, facility and tour, and that no such assignment was available.

Postmaster/Manager or designee name (print) and initials _____
Signature: _____

- (2) If adequate duties are not available within the employee's work limitation tolerances in the craft and work facility to which the employee is regularly assigned within the employee's regular hours of duty, other work may be assigned within that facility.

I certify that every effort was made to identify an assignment for this employee with either a limited duty or rehabilitation assignment (if appropriate) in the employee's regularly assigned facility and tour, and in all available crafts within this facility, and that no such assignment was available.

Postmaster/Manager or designee name (print) and initials _____
Signature: _____

- (3) If adequate work is not available at the facility within the employee's regular hours of duty, work outside the employee's regular schedule may be assigned as limited duty. However, all reasonable efforts must be made to assign the employee to limited duty within the employee's craft and to keep the hours of limited duty as close as possible to the employee's regular schedule.

I certify that every effort was made to identify an assignment for this employee with either a limited duty or rehabilitation assignment (if appropriate) in the employee's regularly assigned facility within a different tour, and that no such assignment was available.

Postmaster/Manager or designee name (print) and initials _____
Signature: _____

8/30/2005

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- (4) An employee may be assigned limited duty or outside of the work facility to which the employee is normally assigned only if there is not adequate work available within the employee's work limitation tolerances at the employee's facility. In such instances, every effort must be made to assign the employee to work within the employee's craft within the employee's regular schedule and as near as possible to the regular work facility to which the employee is normally assigned.

NOTES: Please provide details of your search outside of employee's facility. These details should include all the facilities called, dates facilities called, who spoke you with about limited duty opportunities, etc. . . .

The Manager/Postmaster conducting the search must include this information in the space below (attach additional pages if necessary).

I certify that every effort was made to identify an assignment for this employee outside of my facility. I contacted facilities within the local commuting area (e.g.; other post offices, stations, or plant supervisors in the area considered a reasonable commute for the employee) and was unable to identify an assignment for this employee within their current work tolerances. I then notified my superior Name: _____ (e.g.; MPOO, MDO, etc.) in order to identify either a limited duty or rehabilitation assignment (if appropriate) for this employee.

Postmaster/Manager or designee name (print) and initials _____
Signature: _____

Other Management name, title and initials contacted and involved in the determination of task availability (e.g.; MPOO, MDO, etc.) _____