

Independent Medical Assessments on Behalf of Parties Other Than the Patient

1998 as amended 2002

Medical practitioners are requested to assess persons on behalf of third parties such as insurance companies and employers. In these circumstances, a traditional doctor/patient therapeutic relationship **does not** arise. The role of the medical practitioner in these assessments is to provide an impartial medical opinion. It is not to treat the person. The result of the assessment is a report to the third party, not to the person or the person's treating medical practitioner.

These assessments are a source of complaint from the person being assessed. Independent medical assessors should be aware that persons presenting for a medico-legal or other third party assessments are often nervous, anxious or defensive. Compensation, insurance cover and even employment may depend on the outcome of the assessment. Independent medical assessors should therefore act in a courteous, professional manner and be sensitive to the concerns of the person.

These matters should be addressed when the appointment for the assessment is confirmed:

1. The purpose of the assessment
2. The name and speciality of the medical assessor
3. Payment
4. Requirements regarding chaperonage, same gender assessor, interpreters and presence and role of accompanying persons

Independent medical assessors should introduce themselves to the person and explain the assessor's specialty field of medicine in easily understandable terms, the purpose and nature of the assessment and the assessor's role. The issues that are likely to be considered as part of the history, should be outlined to the person. This is particularly important where a psychiatric history is to be taken. The person presenting for assessment should understand the role of the independent medical assessor is not to treat nor to offer opinions to the person on his or her condition.

The independent medical assessor should explain all aspects of the assessment to the person prior to the commencement of the assessment. This is particularly important if the assessment may be intrusive or involves undressing. Sympathetic consideration should be given to requests for chaperones or an accompanying friend or relative and same gender independent medical assessor. It would be prudent for assessors to record the names of all persons present during the assessment.

Independent medical assessors are reminded that the person's explicit consent to the assessment must be obtained before proceeding, especially if an intimate assessment or the taking of tissue samples is involved. Problems have arisen where explicit consent was not obtained for intimate assessments. Procedures which may

be considered simple or routine by a medical practitioner, may not be seen as such by the person presenting for assessment. Some people may decline to undergo the assessment. If consent is refused, the independent medical assessor must not proceed with the assessment and the party requesting the assessment should be informed as soon as possible.

Where chaperones are present, they should be informed that they are not to take an active part in the assessment. Interpreters or other persons accompanying the person to assist in communication should be informed that they are not to offer opinions or subjective interpretations.

Ideally, chaperones, interpreters and other persons accompanying the person should not be family members.

Independent medical assessors need to be aware that some people may wish to record the assessment. The view of the party engaging the independent medical assessor should be sought on this issue. Independent medical assessors should be aware that a recording of an assessment may be used if there is disagreement over the assessor's report and may wish to make their own recording.

Independent medical assessors should not offer an opinion nor offer gratuitous advice on the person's claim, medical or surgical management. If an independent medical assessor has a serious concern regarding the management of the person, the independent medical assessor should contact the person's treating medical practitioner. Incidental matters identified during the assessment may be notified to the person, but there may be some situations where it is appropriate to notify the person's treating medical practitioner.

Reproduction and distribution of AMA position statements is permitted provided the AMA is acknowledged and that the position statement is faithfully reproduced noting the year at the top of the document.