

# POSITION STATEMENT

## 10 Minimum Standards for Medical Forms Guide

2024

### Introduction

The AMA position outlines 10 minimum standards that should apply to forms that medical practitioners are asked to complete by organisations such as Centrelink, the Department of Veterans' Affairs, the National Disability Insurance Scheme, state and territory health services and WorkCover authorities and others.

The 10 standards are based upon principles that seek to ensure that forms are available and accessible, the doctor's time is valued, the forms are not onerous, privacy is respected, and the process is easy to administer.

Inefficiencies and red tape create an unnecessary burden on doctors, diverting their time away from providing essential medical care for patients.

Organisations rely heavily upon the accurate completion of medical forms to determine patient entitlements. The standards are intended to support organisations that rely on doctors to assist the effective conduct of their business or programs to design medical forms that capture the necessary information in a simple and concise way and does not require doctors and medical practices to spend excessive time filling in forms.

### AMA 10 minimum standards for medical forms

#### Available and accessible

1. Forms must be readily accessible and available in an electronic format that is compatible with existing electronic general practice medical records software.

Medical forms should remain available in paper format for times when computer access is unavailable.

Forms should be designed to auto populate necessary patient information and upload all relevant items from the medical record into the form for transmission.

2. Forms are distributed through medical software vendors. Access to forms does not require web browsing during consultations, nor form-filling online. Consideration should be given to creating a central repository of forms for easy access.

### Value GP time

3. The form has a clear notation that states that medical practitioners may charge a reasonable fee for their services and whether the services are rebatable by Medicare or other insurers.

### Not onerous and respect privacy

4. Demographic and medical data can be selected to automatically populate the electronic form with adequate space being provided for comments.

The diagnoses and recommendations of a medical practitioner in a form or report must never be disregarded or undermined by non-medical personnel.

5. Only information essential for the purpose is requested and must not unnecessarily intrude upon patient privacy.
6. Forms do not require the doctor to supply information when a patient can reasonably provide this in their own right.

Any forms that require regular updating such as Centrelink forms, have at the top of the form a box which can be ticked if there has been no significant change since the last report, to indicate that the rest of the form need not be completed.

There may be occasions where it is not necessary for a GP to sign a form and consideration should be given to who can sign forms and whether the GP can delegate the signing of the form.

### Easy to administer

7. A copy is saved in the patient electronic medical file for future reference.
8. Data file storage size is kept to a minimum.
9. Forms must be co-designed and field tested with GPs under the auspices of a recognised medical representative organisation such as the AMA and the RACGP prior to their release and when undergoing review.
10. Forms must be compliant with and have encrypted electronics transmission capability in line with new technologies being introduced into general practice.

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