

## **Service Provider for Independent Medical Examination (IME)**

### **Schedule C (“IME Criteria & Duties”)**

#### **“IME Criteria”**

1. IME performed by a regulated health professional, with
  - active registration, in good standing,
  - relevant scope of practice and area of expertise,
  - the requisite knowledge, skill and judgement to conduct the IME.
2. Commitment to adhere to all relevant CPSA Standards of Practice, as well as the Canadian Medical Association (CMA) Code of Ethics and Professionalism.
3. In issuing recommendations, to reasonably adhere to principles of the most recent Federation of State Physician Health Program (FSPHP) guidelines, or to document reasons for offering alternative recommendations.
4. In applying fitness to practice principles, to reasonably adhere to principles as outlined in the American Medical Association or the American College of Occupational and Environmental Medicine (ACOEM) or reasonable alternative guidelines for workability determinations in safety-sensitive settings, including the impact of medications and substances.
5. Dual agency (forensic versus clinical) / conflict of interest issues have been resolved, e.g., health monitoring and fitness to practice assessment should not be performed by the entity that conducts the initial fitness to practice (IME). The service provider can provide both services, but not for the same regulated member..

#### **“IME Duties”**

1. To follow best practice guidelines for completion of an IME.
2. Ensure communication between the service provider and CPSA will be conducted in a timely fashion.
3. The initial assessment report should be provided to CPSA and the regulated member and/or their legal counsel and should include no personal or health information, but rather only:
  - Opinion on fitness to practice,
  - Opinion on modifications, limitations, and restrictions,
  - Opinion on whether ongoing monitoring is required.NOTE: A templated form will be furnished at the time of the request of the IME.
4. A copy of the full report should be furnished to the member’s legal counsel (if any), and personal health information or treatment recommendations should be communicated to the member’s treatment provider and/or with PFSP, based on the member’s choice and with the consent of the member.
5. Following assessment, to notify the CPSA without delay of any urgent concerns about regulated member’s fitness to practice or safety.
6. To collect payment for services rendered for the IME directly from the regulated member.