



## Nominated Treating Doctor

The Nominated Treating Doctor (NTD) is the injured worker's main doctor (ie GP) who has to agreed to be the doctor for the management of the claim.

The NTD writes the medical certificates and determines what duties are suitable for the worker to do.

## Treating Specialist

The treating specialist is a specialist for the worker. The NTD will refer the worker to the treating specialist and communicate directly with the worker and the NTD about diagnosis (what is wrong) and prognosis (how long it will take) and may provide treatment (eg surgery, injections). The treating specialist is usually for example an Orthopedic Surgeon, Neurologist, or Neurosurgeon.

## The Doctors



## Independent Medical Consultant

IMC's are registered medical practitioners who assist in return to work process when differences arise between NTD, employer, insurer and worker. Part of the role of the IMC is to contact the NTD and employer.

Employers can request an IMC review (to the insurer) if they are having trouble communicating with the NTD or feel the worker is not progressing as they should. The IMC reports to the insurer about findings/opinions.

## Independent Medical Examiner

The IMA is expected to provide impartial opinion on the medical matters that have been referred to them. They specifically look at the workers condition, fitness for employment and the level of permanent impairment.

The IMA communicates directly with the insurer and is not permitted to advise the worker on treatment or take over the clinical management of the worker. This is often why workers express discontent at the assessment process and outcome of an appointment with an IMA.

## Approved Medical Specialist

The AMS is a senior specialist who has been approved by the Workers Compensation Advisory Council. Their role is to assist resolution of medical disputes surrounding issues related to work, liability and impairment rating.



## Managing the doctor relationship

As an employer, it is important for you to establish communication with the NTD about the workers duties and progress. Don't be afraid to contact the NTD. The relationship between the NTD and worker is a vital one for successful return to work. It is essential that the NTD understands what is involved in the worker's job and knows that the employer is supportive of return to work.

### Tips for talking to the treating doctor (NTD) and building relationships

- Send the doctor a copy of a signed consent form. Note - there is an example signed consent form in the [Templates](#) section. The NTD will need to see that the worker has given you permission to speak to his/her doctor – fax through a signed consent form prior to contacting the NTD book a separate consult for the worker and yourself to attend to introduce yourself to the doctor
- Attend a doctor's appointment with the worker – you need to seek the workers permission and should advise the doctor that you are coming (inform the secretary).
- The doctor will be concerned about preserving their confidential relationship with their "patient". Be mindful of this and suggest that you will join them for only part of the consultation.
  - Provide regular updates to the NTD regarding the workers progress with suitable duties (fax, phone, email). Invite the GP to visit your workplace (this can be especially useful in smaller communities when you have limited choice of GP's and it is very important to establish a positive relationship between your farm and the GP).
  - Try to develop a rapport with the medical receptionist as they usually have control over 'who gets through and who doesn't'
  - Find out the NTD's preferred method of communication – some GP's will never take phone calls during consults, some prefer faxes (You can ask questions and they can fax back to you), some email. Each NTD will have their own preferred method of communication.
- Provide lists of suitable duties, and/or the worker's pre-injury duties to the NTD. This allows them to have a better understanding of the tasks involved with pre-injury duties and allows them to be clear about what they are aiming for.
- If the NTD is away and the worker is then seen by a locum doctor – ensure you make contact with the locum doctor. Make an appointment to meet the

locum doctor with your worker. Note that locum's often prefer not to make decisions while they are "minding" another doctor's patients. It is worth anticipating this and perhaps recommending that the usual NTD leave very specific instructions for their locum in an effort to keep the process moving forwards.

- Don't get caught in the trap of always discussing the worker's pain and what they can't do- focus on what they CAN do. Remember workers can return to work whilst still in pain. Waiting until all pain resolves only encourages ongoing disability.
- Workers should be reviewed weekly – fortnightly in the early (acute stages) and monthly in longer term (chronic cases). Review greater than one month usually means that the claim loses momentum - encourage your worker to be reviewed monthly to ensure communication remains consistent with the NTD.

### What if the worker won't agree for me to speak to the doctor?

Understand that when the NTD agrees to be the treating doctor for the worker they are agreeing to participate in the workers return to work injury management plan. They are also agreeing to communicate clearly and consistently with all stakeholders.

The legislation requires the doctor to communicate with the relevant stakeholders so if the worker doesn't agree to this then they can be deemed to be not co-operating and their benefits can be suspended

- speak to the insurer about this problem
- request an Independent Medical Consultant (IMC, refer page 4) review – the Independent Medical Consultant (IMC) will contact the employer and NTD
- book a separate consult for the worker and yourself to attend to introduce yourself to the doctor
- Fax a weekly summary of the workers progress on suitable duties prior to the appointment.

When a worker is referred to an Independent Medical Examiner (IME, refer to page 4), the specialist is not obliged to inform the worker at the time of the assessment of their opinion or findings. The Independent Medical Examiner (IME) reports directly to the insurer. This can often be distressing for the worker as the doctor does not usually enter any discussion about prognosis or treatment recommendations. It can be helpful for employers to warn injured workers of this outcome.