



College of Physicians and Surgeons of British Columbia

Professional Standards and Guidelines

Independent Medical Examinations

Preamble

This document is a guideline of the Board of the College of Physicians and Surgeons of British Columbia.

The independent medical examination (IME) is a frequent source of complaints to the College. Physicians should be mindful and sensitive to the fact that a patient may be apprehensive and/or reluctant to participate in the examination. Improved communication by physicians and enhanced understanding by patients reduces the potential for a complaint.

College's Position

The College offers the following guidance to physicians who conduct independent medical examinations.

Relating to the Third Party who is requesting the IME:

Address clearly and preferably in writing any potential conflict of interest, whether real or perceived, before agreeing to complete the IME. This provides the party requesting the IME an opportunity to select another physician if they so choose.

Relating to the Patient:

1. Explain the purpose of the examination clearly. Make it plain what your role is in the examination.
2. Explain how this examination differs from a usual patient-physician interaction. Explain that its purpose is to determine the health status and functional status at the time of the examination. It is not for discussion of treatment. Confirm that treatment advice will not be given.
3. Explain the scope of the examination. Describe the areas and systems that will be examined, and why they will be examined.
4. Consider providing the patient with written material that describes the independent medical examination in general terms and explains the purpose, scope, nature and reporting requirements of the examination.
5. For your own medical record, obtain signed and witnessed patient consent prior to proceeding with the independent medical examination.

6. Explain that the report must go to the third party ordering the examination. Determine in advance from the third party whether a copy of the report may be provided to the patient or family physician.
7. Strongly consider having a chaperone present during the entire examination for both males and females.
8. Provide privacy while the patient undresses and dresses. Provide an adequate gown or drape.
9. If the patient attempts to set limits upon the examination, e.g., regarding past history or the extent of the physical examination, explain why the information or examination is necessary. If the patient chooses not to cooperate, consider whether you are able to proceed with the examination in view of the limits set by the patient. If not, record this fact and terminate the examination.
10. Use an independent interpreter if the patient does not speak English, and/or if you do not speak the patient's language fluently. This is particularly important in immigration examinations. The presence and name of the interpreter should be recorded.
11. Visibly note all findings.
12. Record the time that the interview and examination commences and concludes.
13. Avoid commenting on others' management of the patient's problem.
14. Be prompt in completing and submitting your report to the third party.
15. If you become aware of another medical condition as a result of your assessment, inform the patient and refer him/her back to his/her regular family physician for further investigation.

See also [Sensitive Examinations](#)

Board Approved September 2010

Updated October 2009

Revised September 2010

Revised February 2013