



Introducing The IC MediScene

The Ohio Workers' Compensation System has provided injured workers with medical care and financial compensation for work related injuries, diseases, and deaths since 1913. The Bureau of Workers' Compensation (BWC) is the administrative branch of this system, managing claims, collecting employer premiums, and paying bills. The Industrial Commission of Ohio (Commission) is the adjudicatory branch of this system.

Most examinations requested by the Industrial Commission are to assist the Commission in the consideration of Permanent and Total Disability (PTD).

This newsletter is intended to provide periodic, ongoing information to you, the Commission's examiners, to help guide you effectively through the PTD IME process.

We encourage specialist examiners and other interested parties to share ideas they believe may improve the system. Call the Commission Medical Advisor at 614.466.4291 with any questions.

Did you Know?

Examining the Issues: Allowed Conditions

Because allowed condition(s) are the legal basis of each claim, it is essential to the legal integrity of an IME that examiners accept the allowed condition(s) in the claim. **That is, the examiner should not question the validity of the allowed condition(s).** The purpose of the IME is to evaluate whether the allowed condition(s) have reached a level of maximum medical improvement (a plateau), and determine if and how much impairment has resulted from that condition(s).



Please base your opinion(s) solely on impairment arising from the allowed condition(s) highlighted on the IC-Medical Exam Worksheet for each specialist examiner. If current examination findings fail to confirm the presence of an allowed condition(s), examiners should state "there is no evidence of impairment from the allowed condition(s) at the time of this examination." Examiners may not state "there is no evidence of the allowed condition(s)." This constitutes a denial of an allowed condition(s) and may disqualify the examination at hearing or in court.

Meet the Chief Medical Advisor, Terrence B. Welsh, M.D.

Dr. Terrence Welsh became the Chief Medical Advisor at the Industrial Commission of Ohio in July 2007.

In this position, Dr. Welsh is responsible for the development, implementation and administration of physician recruitment and training.

Before arriving at the Industrial Commission, Dr. Welsh has worked in private practice in Portsmouth, Ohio for 16 years. He has served as Chief of Staff at Southern Ohio Medical Center and President of

the Scioto County Medical Society.

A native of Lancaster, Ohio, Dr. Welsh is a graduate of Marquette University and the University of Cincinnati College of Medicine. He is certified by the American Board of Medical Examiners, the American Board of Physical Medicine and Rehabilitation and the American Board of Electrodiagnostic Medicine.

Dr. Welsh can be reached at 614.466.4291 or through e-mail at twelsh@ic.state.oh.us.

The Columbus regional office schedules all initial medical examinations. Other regional offices reschedule examinations in case of cancellations, etc.

Continuing education review questions MediScene Oct. 07

1. The purpose of specialty examinations requested by the Industrial Commission to assist in the determination of permanent total disability is
 - A. To determine the validity of the allowed conditions.
 - B. To determine if the allowed conditions have reach maximum medical improvement.
 - C. To determine disability.
 - D. All of the above.
2. Denying the validity of an allowed condition
 - A. Is the important to the integrity of the examining specialist.
 - B. Is best done in the discussion section of the report.
 - C. May disqualify an examination as evidence at hearing.
 - D. A. and C.
3. Scheduling of examinations
 - A. Initially occurs in the Columbus office.
 - B. Is performed with no bias for the injured worker, their employer or employer representative, or the examining specialist.
 - C. May occur in regional offices in the case of rescheduling due to cancellations, ect.
 - D. All of the above.

(Answers: 1. B.; 2. C.; 3. D.)



Meet the Chairperson, Mr. Gary M. DiCeglio

Gary DiCeglio joined the Industrial Commission of Ohio as the new chairperson in July 2007.

Originally from Akron, Ohio, Gary earned a Bachelor of Science degree in economics from the University of Akron in 1988. In 1992, he received his law degree after graduating cum laude from the University of Akron School of Law.

As an employee of the Goodyear Tire and Rubber Company, Gary became a Division Chairman with the United Rubber Workers, a labor union for workers employed by rubber manufacturers. When the United Rubber Workers merged with the United Steelworkers in the 1990s, Gary worked to improve its members' wages and benefits as a lobbyist in Washington D.C.

In 1998, Gary joined the Ohio AFL-CIO, the largest federation of unions in the United States, as the Director of Compensation and Safety. In this position, Gary focused on worker safety issues, establishing Ohio's prescription drug discount card program and raising the state minimum wage. Gary also played an important role in crafting Senate Bill 7, which made numerous changes to the Workers' Compensation law in Ohio.

Did you Know?

Examining the Issues: Maximum Medical Improvement

The Ohio Industrial Commission (IC) asks three questions of its examining physicians for the purpose of the Permanent Total Disability Independent Medical Examination. These include: 1) Has the injured worker reached maximum medical improvement; 2) What is the percentage of permanent impairment arising from each of the allowed conditions in each claim, and; 3) Complete the Physical Strength Rating Form or Occupational Activity Assessment. The first of these questions will be addressed in this issue of The IC MediScene.

Maximum medical improvement is defined in the IC Medical Examination Manual as "A treatment plateau (static or well stabilized) where no fundamental or physiologic change can be expected within a reasonable probability, in spite of continuing medical or rehabilitative procedures. An injured worker may require supportive treatment to maintain this level of function."

In turn, *The AMA Guides, Fifth Edition*, tells us that "An impairment is considered permanent when it has reached maximum medical improvement." Herein lies the importance of determining maximum medical improvement prior to assigning percentage of whole person impairment.

It is uncommon for an application for Permanent Total Disability to be filed at

a time when the injured worker is not, in fact, maximally improved. It does, however, occur. It is also uncommon that an injured worker arrives for evaluation after having just had surgery, thereby making evaluation of a relevant body part impossible. Other similar unforeseen circumstances may occur. How should the examining physician proceed?

If during the course of an examination for Permanent Total Disability you determine

that it is your opinion an injured worker has not reached maximum improvement for any of the allowed conditions, or that you are not able to examine a relevant body part adequately, then it is advised not to attempt

assigning a percentage of impairment for any of the allowed conditions. Also, do not complete a Physical Strength Rating or Occupational Activity Assessment form. In this instance it is appropriate simply to report your examination findings as well as your opinion regarding maximal medical improvement, indicating you are unable to assign a percentage of whole person impairment.

Remember, combined whole person impairment cannot be considered valid unless it accounts for all of the allowed conditions in each claim, and impairment cannot be considered permanent until it reaches maximum medical improvement.



Opinions implying or stating that the industrial accident or exposure did not or could not cause the allowed condition or conditions will disqualify the report as evidence at hearing.

Continuing education review questions MediScene Dec. 2007

1. Which statement or statements are most appropriate when assessing percentage of impairment resulting from an allowed condition?
 - A. "There is no evidence of impairment from the allowed condition of depression at the time of this examination. Therefore, in my opinion there is zero percent impairment due to this allowed condition. "
 - B. "On review of the record, it is apparent the injured worker never had depression, and the accurate diagnosis is bipolar disorder." Therefore, in my opinion there is zero percent impairment due to this allowed condition. "
 - C. "It is my opinion after evaluation of the injured worker today, and review of the record, that her depression is due to circumstantial factors unrelated to her work injuries and not recognized in this claim. Therefore, in my opinion there is zero percent impairment due to this allowed condition. "
 - D. A. and C.
2. If it is determined at the time of examination that an allowed condition in a claim has not reached maximum medical improvement, then the examining physician should
 - A. Make recommendations that might help them reach maximum medical improvement.
 - B. Assign an impairment percentage only to those conditions which have reach maximum medical impairment.
 - C. Not assign impairment to any of the allowed conditions, and indicate that whole person impairment cannot be considered until all of the allowed conditions are maximally improved.
 - D. A. and C.
3. Maximum medical improvement, according to the Industrial Commission medical examination manual
 - A. Is a treatment plateau (static or well stabilized) where no fundamental or physiologic change can be expected in spite of continuing medical or rehabilitative procedures.
 - B. When determined, means that no further treatment can be rendered.
 - C. Depends on a reasonable degree of probability ("more likely than not"), rather than certainty.
 - D. A. and C.
4. Industrial Commission examinations requested for the purpose of assisting in the determination of permanent total disability request the examining special to formulate opinions regarding which of the following?
 - A. Maximum medical improvement.
 - B. Combined whole person impairment for conditions allowed in the claim.
 - C. Physical or mental limitations due to the allowed conditions.
 - D. All of the above and nothing more.

(Answers: 1. A.; 2. C.; 3. D.; 4. D.)