Evaluation Tool Criteria

Requesting Clinical Opinions¹

This tool is intended to evaluate the quality of the request for an internal clinical opinion. It is not intended to be used to assess the opinion or how the opinion is used.

Q#	Question	Question Tip	Question
			Weight
Q1	Did the issue / topic description provide sufficient context for the clinician?		10
Q2	How well did the officer summarize relevant clinical history (or refer to a recent relevant summary)?	Does the referral information reference the clinical evidence that is relevant to the question (e.g.: prior clinical opinions, AP and specialist reports, imaging reports, etc.).	5
Q3	Did the officer review relevant prior claims?	Were there any relevant prior claims, and if so, were those claim details summarized including a brief reference to significant clinical investigations?	5
Q4	Were pre-existing / co-morbid conditions brought to the clinician's attention?	Is there any evidence of pre-existing conditions, and if so, were those conditions included in the clinical background (including the baseline function if relevant)?	5
Q5	Were clinical RTW factors identified if relevant to the opinion request (e.g.: substance abuse, no regular attending physician, etc.)?	Clinical RTW factors may include: substance abuse, no regular attending physician, etc.	5
Q6	Did the officer identify what was accepted as fact relevant to the question(s) being asked?	Will it be clear to the clinician what has and has not been accepted as fact(s)? (e.g.: mechanism of injury, critical job demands, etc.)	10
Q7	Could the issue have been decided / resolved without a clinical opinion?	Did the question(s) asked require clinical input?	15

¹ This tool was created by Compensation Practices & Quality with representation by each relevant WES Claims region and department(s).

Q8	Were the question(s) clearly worded?	It should be clear to the clinician what is being asked. It should be easy for the clinician to identify and respond to each specific question.	15
Q9	Was the wording appropriately clinical rather than adjudicative?	Questions should not use adjudicative terminology (e.g.: the legitimacy of pain complaints, whether a worker is 'disabled', the significance of change, the causative significance of an activity, etc.).	20
Q10	Were irrelevant question(s) asked?		5
Q11	Were relevant question(s) missed?		5