

## Section 2

# CERTIFICATION – THE RULES

## General rules for the issue of medical statements (Med 3, 4 and 5)

You are required to record on the statement the advice which you give to your patient regarding their ability to perform their own job or usual occupation.

When providing a medical statement you should ensure that the appropriate form:

- **is completed in ink**
- **is completed and signed by a doctor** (defined as a registered medical practitioner other than the claimant)
- **is issued once** – any replacement certificate which may be required if the original is lost should be clearly marked 'duplicate' and should be provided by the practitioner who issued the original certificate
- **is for Social Security purposes only** - do not use the prescribed certificates for anything other than Statutory Sick Pay or Social Security benefit purposes
- **is kept secure to prevent misuse and fraud** – for example, a pad of Med 3 forms can be as 'valuable' in the wrong hands as a pad of FP10 prescription forms

• contains:

**the patient's name**

**the date of examination** on which the statement is based

**an accurate diagnosis** of the patient's disorder which has led you to advise the patient to refrain from work or has caused the claimant's absence from work. [ There are special circumstances where this rule is relaxed, described in the section dealing with the MED 6.] Terms which do not relate to a specific disease or disablement should not be used, for example 'bereavement' or 'pregnancy'.

**the date the statement is issued**

**the address of the doctor**

**the signature of the doctor**

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## Rules for the completion of form Med 3

FOR SOCIAL SECURITY AND STATUTORY SICK PAY PURPOSES ONLY  
**NOTES TO PATIENT ABOUT USING THIS FORM**

You can use this form either:

1. For Statutory Sick Pay (SSP) purposes - fill in Part A overleaf. Also fill in Part B if the doctor has given you a date to resume work. Give or send the completed form to your employer.
2. For Social Security purposes - To continue a claim for state benefits fill in Parts A and C of the form overleaf. Also fill in Part B if the doctor has given you a date to resume work. Sign and date the form and give or send it to your Local Social Security Office QUICKLY to avoid losing benefits.

**NOTE:** To start your claim for State benefits you must apply for SSI if you are self-employed, unemployed or non-employed OR for SSP if you are an employee. For further details get leaflet IB202 from a Social Security Local Office).

Doctor's Statement

In confidence to  
Mr/Mrs/Miss/Ms \_\_\_\_\_

I examined you today/yesterday and advised you that

(a) You need not refrain from work \_\_\_\_\_  
for \_\_\_\_\_

OR unless \_\_\_\_\_

Diagnosis of your disorder causing absence from work \_\_\_\_\_  
Doctor's remarks \_\_\_\_\_

Doctor's signature \_\_\_\_\_ Date of signing \_\_\_\_\_

Form Med 3

**NOTE TO DOCTOR\*:** See inside front cover for notes on completion

- **You must examine the patient on the day, or the day before, you issue this statement**

(Note: Although a certificate can be issued to a patient's representative, this does not override the necessity of seeing the patient on the day, or the day before, a Med 3 or Med 4 is issued)

### Periods of incapacity:

#### Closed certificate

You may complete the 'until' section when a specific date for return to work is given (eg. 'until 4 April 2005'). This specific date may be up to 14 days after the date the certificate is issued. Where you have advised no need to refrain from work, and found no clinical signs of the disorder which the claimant says caused his incapacity, instead of specifying a diagnosis, 'unspecified' may be entered.

#### Open certificate

You may complete the 'for' section when a period of expected incapacity can be given (e.g. 'for two weeks') but there is no specific date for return to work. This indicates when you plan to review the patient.

Within the first six months of incapacity, a certificate can be issued for a period of up to six months from the date of the examination where this is clinically justified.

Certificates issued after the first six months of incapacity can be for any clinically appropriate period up to 'until further notice.'

When providing advice to patients about fitness for their usual occupation, it is good practice to issue a closed Med 3 certificate [for up to 14 days] with a date when you consider they will become fit for work.

For medical conditions where clinical progress and outcome are not straightforward and you issue an open medical statement you will

need to review the patient again and provide them with a closed statement giving a date on which they will become fit to resume work.

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FOR SOCIAL SECURITY AND STATUTORY SICK PAY PURPOSES ONLY

Special Statement by the Doctor

In confidence to Mr/Mrs/Miss/Ms

(A) I examined you on the following dates \_\_\_\_\_ of \_\_\_\_\_ and advised you that you should refrain from work \_\_\_\_\_

(B) I have not examined you but, on the basis of a recent written report from \_\_\_\_\_ (Name if known) \_\_\_\_\_ (Address) \_\_\_\_\_

I have advised you that you should refrain from work from \_\_\_\_\_ to \_\_\_\_\_

Diagnosis of your disorder causing absence from work \_\_\_\_\_

Doctor's remarks \_\_\_\_\_

Doctor's signature \_\_\_\_\_ Date of signing \_\_\_\_\_

The special circumstances in which this form may be used are described in the handbook "A guide for medical practitioners."

Form Med 5

PATIENT TO COMPLETE PARTICULARS ON REVERSE

## Rules for the completion of form Med 5

The rules governing the issue of a Med 3 statement require the doctor to have seen the patient on the day of issue or the previous day. There may be occasions when a doctor wishes to supply evidence of incapacity for work for an earlier period. In these circumstances a Med 5 may be appropriate.

When issuing a Med 5 statement you must:

- **base your advice on your examination of the patient on a previous occasion**
- **be sure that you would have advised the patient to refrain from work from the date of examination for the entire period of the certificate.**

The only exception is where the certifying doctor has a report from another doctor. You may use this evidence to support an opinion that your patient is incapable of work providing:

- **the report was issued less than one month previously**
- **the certificate you issue does not cover a forward period of more than one month.**

## Background notes

Certifying doctors can only advise a patient that they would have been medically incapable of work for a past period in circumstances where it would have been appropriate to give such advice prospectively. Unless there is clear evidence available to the doctor to support the advice, for example clinical notes based on a previous examination of the patient, it is unlikely that the doctor will be in a position to provide such advice. The period of incapacity advised by the doctor should be fully in keeping with the clinical findings at the onset of the period of incapacity.

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**Doctor's statement**  
Do not use this form for people claiming Statutory Sick Pay  
To the doctor (to be assessing your patient's eligibility for Incapacity Benefit and other state benefits under the old work test). Please fill in the following statements.

In confidence to Mr/Ms/Miss/Ms

Main diagnosis  
(be as precise as possible)

Other diagnoses

Doctor's remarks  
(including comments on the disabling effects of the condition, its progress, treatment and prognosis. Accuracy and detail will avoid requests for completion of a medical report)

To the doctor (while the above information is entered out, we need some evidence that your patient should refrain from their usual occupation. Information you give here will not be part of the old work test. I am issuing the following statement based upon the current guidance to certifying medical practitioners. I examined you today / yesterday and advise you

that you should refrain from your usual occupation.

that you should refrain from your usual occupation for \_\_\_\_\_ (period) for \_\_\_\_\_ (period)

or until \_\_\_\_\_

Doctor's signature \_\_\_\_\_ Date / /

Stamp

Med 4

## Rules for the completion of a form Med 4

When you issue form Med 4 it should contain details of:

- **the diagnosis of the main incapacitating condition**
- **other relevant medical conditions**
- **in the space for 'doctor's remarks' the following information:**

**an indication of the disabling effects of the condition**

(ie. the physical or mental effects of the incapacitating condition(s))

**current treatment and progress**

an indication of whether your patient would be unable to travel to an examination centre as a result of their medical condition, together with a reason for this opinion. If you do not indicate that there is such a restriction the Department for Work and Pensions will assume that the patient is capable of travelling to an examination centre up to 90 minutes travelling time from the patient's home.

In the final section of the Med 4 you should record the advice which you have given your patient regarding their ability to perform their usual occupation. You may at this point advise the patient that they are now fit to return to their regular employment. The advice you give here supersedes advice given on any earlier statement, such as form Med 3. If you have advised your patient to continue to refrain from their usual occupation this advice will only apply until the Personal Capability Assessment decision has been made by the Department for Work and Pensions. Since this advice relates to the patient's usual occupation it does not form any part of the PCA decision.

In due course your local Department for Work and Pensions office will write to you stating that the Personal Capability Assessment has been applied and that your patient no longer requires medical statements to support their current claim to a state incapacity benefit. [See Section 6: 'State benefits and Assessment of Entitlement'] Until you receive such notification you are required to issue statements for as long as you continue to advise your patient that he/she is incapable of his/her usual occupation.

You should be aware that following this notification from the Department for Work and Pensions, there are specific circumstances when you may issue a further certificate to a patient who has been found capable under the Personal Capability Assessment (Section 6).

## Background notes

Form Med 4 should be issued to a patient on request prior to the first application of the Personal Capability Assessment in a spell of incapacity (see Section 6 and Appendix 2 of this Guide). It should be issued even if a Med 3 is still current. The patient will have received a letter from the Department for Work and Pensions advising them that the Personal Capability Assessment is to be applied and asking them to complete a questionnaire giving details of their disability. The letter advises claimants that form Med 4 should be obtained from their own doctor. In most cases this will be after 28 weeks of incapacity, but it may be from the start of the claim if the patient has not had sufficient recent work. The certifying doctor is not required to read or comment upon the patient's questionnaire.

A fully completed Med 4 can:

- where appropriate, provide evidence to the DWP to identify those with severe conditions who may be in an exempt category (see Appendix 3)
- avoid the need for the patient to undergo an examination if the DWP Medical Officer has sufficient medical evidence which is consistent with the patient's own description of their disability
- avoid the need for the DWP Medical Officer to ask for a further report
- reduce the requirement for medical evidence in the event of an appeal against the disallowance of benefit since the necessary information will be available at the time the initial decision is made.

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# CERTIFICATION

## Rules for the completion of form Med 6

If you have not entered a diagnosis on form Med 3, Med 4 or Med 5 as precisely as the rules require, you should notify the local DWP office at the same time as you issue the statement, by sending a completed form Med 6. A copy can be found included in each pad of Med 3 and Med 4 forms. The address of the nearest office can be found in the telephone directory under 'Department for Work and Pensions'.

On receipt of form Med 6, if your patient is claiming a state incapacity benefit, a DWP Medical Officer will write to you requesting a brief report. This report provides an opportunity for you to give a full diagnosis to the Medical Officer.

An accurate diagnosis must be entered on medical statements. This will:

- enable the DWP Medical Officer to identify those patients who may be exempt the appropriate test of incapacity for work
- allow the collection of accurate data about medical causes of incapacity for work

There are occasions when a doctor may feel that it could be prejudicial to their patient's well being if they were to issue a certificate bearing the true diagnosis. This will usually be where the doctor feels that the patient, and/or his employer, should not know that diagnosis.

When considering whether it is appropriate to use a non specific diagnosis, a doctor should consider who will see the certificate:

**Med 3** and **Med 5** certificates are provided to the patient who will, where appropriate, pass them to their employer during the first 28 weeks of illness.

**Med 4** certificates are provided to the patient and are **not** to be passed to an employer. Med 4 certificates relate only to state benefits and the patient is required to send this form to the Department for Work and Pensions office with the appropriate incapacity questionnaire.

**Doctor's statement**  
**In confidence**  
To be filled in by the doctor. Please use BLOCK CAPITALS.

To The Manager \_\_\_\_\_ DO

Patient's surname Mr/Mrs/Miss/Ms \_\_\_\_\_

First names \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

National Insurance number

I have been issuing medical statements to my patient who is under my care. I have been recording a 'Vague' diagnosis on the statements. This is because, in my opinion, to record the actual diagnosis may be harmful to my patient.

Please send me a medical report form so that I can give you additional information, including the actual diagnosis of the disorder suffered by this patient.

Doctor's signature \_\_\_\_\_

Date \_\_\_\_\_

Stamp \_\_\_\_\_

Please send this form to your patient's Social Security office. The address is in the phone book. Look under SOCIAL SECURITY or BENEFITS AGENCY. Do not send this form to Benefits Agency Medical Services.

You can get more copies of this form from your Health Authority or Health Board.

Med 6

### Background notes

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**Doctor's statement**  
**In confidence**  
*To be filled in by the doctor. Please use BLOCK CAPITALS.*

To The Manager \_\_\_\_\_ DO

Patient's surname Mr/Mrs/Miss/Ms

First names \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

National insurance number

If known

I have been issuing medical statements (form Med 3) to this patient who is under my care. Please could you arrange for a doctor from the Benefits Agency Medical Services to give an opinion on their ability to carry out their own occupation. Please send me a medical review form so that I can give you additional information.

Doctor's signature \_\_\_\_\_

Date \_\_\_\_\_

Stamp \_\_\_\_\_

Please send this form to your patient's Social Security office. The address is in the phone book. Look under SOCIAL SECURITY or BENEFITS AGENCY. Do not send this form to Benefits Agency Medical Services.

You can get more copies of this form from your Health Authority or Health Board.

RM 7

### Background notes

## Use of form RM 7

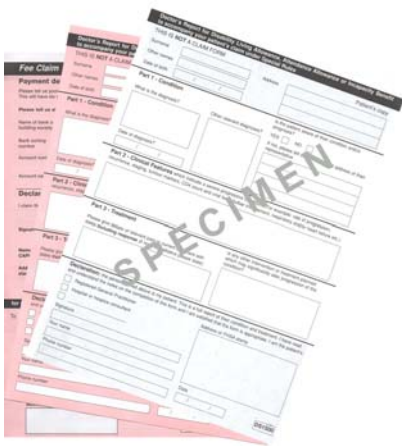
In certain circumstances you may suggest an independent assessment of your patient by the Department for Work and Pensions earlier than it might have occurred under normal control procedures. One such circumstance might be where you have some doubts about your patient's ongoing incapacity for work but are continuing to issue statements. Your request may be made on form RM 7 to the local Department for Work and Pensions office who will take appropriate action. [See background note below.] A copy of form RM 7 is included in each pad of Med 3 and Med 4 statements. The current form RM 7 (revised 1995) does not ask for any clinical information.

If your patient is not claiming a state incapacity benefit (perhaps because they are receiving Statutory Sick Pay from their employer) the Department for Work and Pensions may be unable to take any immediate action. Action could be taken if, in the same spell of incapacity, the patient goes on to claim a state benefit. If action is taken the Department for Work and Pensions Medical Officer will write to you requesting a report.

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## Use of form DS 1500 – Special Rules



You should issue form DS 1500 if requested by a patient (or their representative) if you consider that the patient may be suffering from a potentially terminal illness. The DS 1500 should be handed to the patient (or their representative) and not sent directly to the DWP. A fee is payable by the DWP for the completion of this form, which is supplied in booklets by the Department on written application (see address below). The DS 1500 asks for factual information and does not require you to give a prognosis. The report should contain details of:

- The diagnosis
- Whether the patient is aware of their condition and if unaware, the name and address of the patient's representative requesting the DS1500
- Relevant current and proposed treatment
- Brief clinical findings

### Background notes

Terminal illness is defined in Social Security legislation as: 'a progressive disease where death as a consequence of that disease can reasonably be expected within 6 months<sup>5</sup>. **People suffering from such an illness can claim Disability Living Allowance (DLA), Attendance Allowance (AA) or Incapacity Benefit (IB) under what are called 'special rules'.**

To get DLA or AA for help with personal care, a person normally has to show that they need help to look after themselves. Under 'special rules' someone who is terminally ill can get:

- DLA or AA without having to satisfy a qualifying period
- DLA or AA paid at the highest rate of care even if they do not need help looking after themselves

In the case of IB a person who is terminally ill and incapable of work can get the highest rate of benefit after 28 weeks instead of 52 weeks sickness.

Sometimes a patient or carer may ask you to complete a DS 1500 even when the patient is not suffering from a potentially terminal illness. They may think that this will allow their claim to be processed more quickly. A simple explanation of the purpose of special rules may help the patient or carer to understand your refusal to issue a DS 1500.

<sup>5</sup> 66(2) Social Security Contributions and Benefits Act 1992

Requests for DS1500 forms must be made on your letterhead and signed by a Doctor or Practice Manager. They may be submitted by Fax to 01253 330 240, or sent by post to: DWP, DCS Unit 12, Manchester Road, Heywood, OL12 2PZ