

Subject	Report Requirement	Rule Citation
Multiple certifications of maximum medical improvement (MMI) and impairment rating (IR)	The designated doctor may provide multiple certifications of MMI and impairment ratings only when directed by the division.	Section 127.10(d)
Identification of questions	Identify the questions DWC ordered to be addressed.	Section 127.220(a)(1)
Disqualifying associations	Include a statement that there is no known disqualifying association as described in 28 Texas Administrative Code Section 127.140 (relating to Disqualifying Associations) between the designated doctor (DD) and the injured employee, the injured employee's treating doctor, the insurance carrier, the insurance carrier's certified workers' compensation health care network, or a network established under Labor Code Chapter 504.	Section 127.220(a)(12)
Date and manner sent	Certify the date and manner the report was sent to all recipients.	Section 127.220(13)
Review and approval	Indicate that the DD reviewed and approved the final version of the report.	Section 127.220(a)(14)
Answers to questions assigned	 Clearly answer each question to be addressed by the DD exam. Answer only the questions assigned. Sufficiently explain how the DD determined the answer to each question within a reasonable degree of medical probability. 	Section 127.220(a)(2) and (3)
Use of guides, guidelines, and evidence-based medicine	 Demonstrate, as appropriate, how you applied or considered: the American Medical Association (AMA) Guides to the Evaluation of Permanent Impairment; DWC-adopted return-to-work and treatment guidelines; and other evidence-based medicine. 	Section 127.220(a)(4)



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Identifying information	Include general information about the identity of the DD, injured employee, employer, treating doctor, and insurance carrier.	Section 127.220(a)(5)
Exam date and location	State the date of the examination and the address where the examination took place.	Section 127.220(a)(6)
Testing and referrals	Summarize any additional testing conducted or referrals made, why the testing or referral was necessary to resolve a question. Provide the date the testing or referral examination was done.	Section 127.220(a)(7)(A)-(E)
Listing of medical records and documents reviewed	List the specific medical records or other documents reviewed, including dates of documents.	Section 127.220(a)(9)
Medical records review	Provide total time required for the designated doctor to review the medical records.	Section 127.220(a)(10)
Signature	Sign the narrative report.	Section 127.220(a)(11)
Required forms	 Complete and file these DWC forms that are required with narrative reports: MMI and IR: DWC Form-069, <i>Report of Medical Evaluation</i>; Extent of injury, disability, other similar issues: DWC Form-068, <i>DD Examination Data Report</i>; and Return to work and return-to-work for supplemental income benefits: DWC Form-073, <i>Work Status Report</i>. 	Sections 127.220(b)- (c) and 130.1(a)(4)(D)
Completing the DWC Form-069, Report of Medical Evaluation and documenting MMI and IR in the narrative		



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Date of MMI-limitations	 Do not use a date that is prospective or conditional. Assign the specific date when the injured employee reached MMI. Do not use a date after the statutory MMI date. 	Sections 130.1(a)(4)(C)(i) and 130.1(b)(4)(C)
Use and citation of the correct editions of the AMA guides	Use the appropriate edition of the AMA Guide to the Evaluation of Permanent Impairment, Fourth Edition of the AMA Guides (1st, 2nd, 3rd, or 4th printing, including corrections and changes the AMA issued before May 16, 2000) to assign an IR for an injured employee's current compensable injury that has reached MMI.	Sections 130.1(c)(2), 130.1(d)(1)(B)(vii), and 130.1(c)(2)(B)(i)
IR based on the injured employee's condition on the MMI date	 Assign an IR for the current compensable injury based on the injured employee's condition on the MMI date considering the medical record and the certifying examination. To prevent an invalid IR, base the injured employee's condition on the MMI date. For it to be valid, include an IR and the corresponding MMI date in the DWC Form-069, <i>Report of Medical Evaluation</i>. 	Section 130.1(c)(3)
Findings	Document specific laboratory or clinical findings of an impairment.	Section 130.1(c)(3)(B)
Clinical findings	 Describe and explain specific clinical findings related to each impairment, including 0% IR. Describe how the findings relate to and compare with the criteria described in the applicable chapter of the AMA Guides. 	Sections 130.1(c)(3)(D)(i)-(ii) and 130.1(d)(1)(B)(vi)
Inability to get measurements	Explain why you couldn't get the required measurements.	Section 130.1(c)(3)(D)(ii)
Whole body IR	Assign one whole body IR for the current compensable injury.	Section 130.1(c)(3)(E)



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Additional testing or referral	 Refer the injured employee to another doctor or health care provider for testing or evaluation if additional medical information is required. Incorporate all the additional information into the report required by rule. If the additional information is not consistent with the clinical findings, clearly explain why the information is not being used as part of the IR. 	Section 130.1(c)(3)(F)(ii)
Report signature	Sign the report of medical evaluation. You may use a rubber stamp or an electronic signature.	Section 130.1(d)(1)(A)
Exam date	Include the date of the certifying examination in the narrative report.	Section 130.1(d)(1)(B)(i)
Date of MMI	Include the date of MMI in the narrative report.	Section 130.1(d)(1)(B)(ii)
Normal and abnormal findings	 Explain the findings of the certifying examination, including both normal and abnormal findings related to the compensable injury in the narrative report. Explain the analysis you performed to find whether the injured employee reached MMI in the narrative report. 	Section 130.1(d)(1)(B)(iii)
Medical history	Include a narrative history of the medical condition that outlines the course of the injury and correlates the injury to the medical treatment in the narrative report.	Section 130.1(d)(1)(B)(iv)
Clinical status	Include the current clinical status in the narrative report.	Section 130.1(d)(1)(B)(v)
Diagnosis and clinical findings	Include the diagnosis and clinical findings of permanent impairment in the narrative report.	Section 130.1(d)(1)(B)(vi)



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Return-to-work guidelines	Use the disability duration values in the current edition of <i>MDGuidelines</i> . Exclude all sections and tables relating to rehabilitation as guidelines for the evaluation of expected or average return-to-work time frames.	Section 137.10(a)	
Completing the DWC Form-073, Work Status Report and documenting return-to-work status in the narrative			
Work status	Identify the injured employee's work status.	Section 129.5(c)(1)	
Effective dates	Provide effective dates and estimated expiration dates of their current work status.	Section 129.5(c)(2)	
Work restrictions	Identify any activity restrictions.	Section 129.5(c)(3)	
Explanation when the employee cannot return to work	Explain how the compensable injury prevents the employee from returning to work.	Sections 129.5(c)(4) and (5)	