



Statement on medical certification

Background

1. As a doctor you are expected to sign a variety of medical certificates that range in purpose from confirming sickness to certifying death and are required by receiving agencies, which include employers, insurers, ACC and government departments.
2. This statement outlines the standards that you must follow when completing a medical certificate¹. It may be used by the Health Practitioner's Disciplinary Tribunal, the Council and the Health and Disability Commissioner as a standard by which your conduct is measured. A certificate you have completed may also be challenged in a New Zealand court and you may be called upon to justify your decisions.

Professional obligations

3. Certificates are legal documents. Any statement you certify should be completed promptly, honestly, accurately, objectively and based on clear and relevant evidence.
4. Your obligation is to the patient and to the law. Issues like the type of certificate being completed or who initiated, or pays, for the consultation must not influence your assessment and findings.
5. You must not complete a medical certificate for yourself or someone close to you².

Implications of certificates

6. You must be aware that completing a certificate has implications for the patient, yourself, and the agency receiving the certificate³.
7. Studies have shown that patient, family and cultural factors may influence how doctors complete certificates⁴. Certificates may have financial implications for the patient and the recipient through benefits, employment and compensation payments and failure to complete a certificate appropriately may have a negative impact on the patient, the patient's family or the receiving agency. You need to be aware of these influences and recognise that you may be susceptible to them.

¹ The Council is also aware that this statement is often referred to by members of the public, including employers and other receiving agencies. If you are a member of the public and are concerned about the content of a medical certificate then we suggest that you seek the patient's consent and approach the doctor who issued the certificate with your concerns. Footnote 10 contains some specific advice to help you seek more information about the patient's capacity. If the doctor's response does not meet your needs, then you might consider asking the patient to see another doctor to obtain a second opinion. If you are concerned that a doctor has not complied with the requirements of this statement, you can lodge a complaint with the Medical Council or the Office of the Health and Disability Commissioner.

² You should refer to the Council's statement on *Providing care to yourself and those close to you* for further information.

³ In addition to being a legal document, many certificates are also an activity prescription intended to outline the activities that may contribute to the patient's recovery, and/or those which may hinder a return to health. As with all prescribed treatments, you and the patient must balance the risks and benefits of the treatment plan, and any alternatives, before agreeing on the best treatment option. You should also consider any information from an employer about the patient's work environment, the workplace support available and possible alternate duties.

⁴ C McAullum, I St George and G White. *Death certification and doctors' dilemmas*. British Journal of General Practice 2005; 55: 677-683. Shiels C, Gabbay MB, Ford FM. *Patient factors associated with duration of certified sickness absence and transition to long-term incapacity*. British Journal of General Practice. 2004; 54: 86-91. Shiels C, Gabbay M. *The influence of GP and patient gender interaction on the duration of certified sickness absence*. Fam Pract, 2006; 23(2): 246-252.

8. Completing a certificate may also directly affect the safety and security of others. Certifying a patient to undertake work when he or she is unfit may place the patient or the patient's colleagues at risk.
9. Because a certificate has implications for the receiving agency, that agency might contact you for more information. You should therefore have a conversation with the patient about the information you are permitted to disclose if you are approached⁵.

Content of certificates

10. Certificates must meet the standards outlined in relevant legislation and be written legibly, and in such a way that it is understandable to a lay person.
11. The information disclosed should be accurate and based upon clinical observation, with patient comment clearly distinguished from clinical observation.
12. Certificates should provide the necessary information required by the receiving agency and consented to by the patient. Receiving agencies seek information to guide their planning and may believe they will have a better idea of timeframes and restrictions if they have all the medical information. However, the only information they are entitled to is your clinical opinion on safe activities / restrictions and timeframes. The certificate should not include private or irrelevant information. A diagnosis does not have to be disclosed unless it has direct implications for the receiving agency. However, where the diagnosis relates to a workplace injury or illness, or where the illness or injury may have an impact on co-workers and the public⁶, and the medical certificate is to be received by the patient's employer you should seek the patient's permission and include on the certificate both a diagnosis and the workplace factors which may have contributed⁷.
13. Any comments on fitness for work should refer specifically to your clinical opinion, outlining those activities that are safe for the patient to undertake and appropriate restrictions, or unsafe activities that the patient should not undertake⁸. If the patient is fit for some activities, this should be recorded in the certificate. Any duties that should not be attempted should also be clearly stated.
14. A certificate should clearly identify the examination date and the time period of treatment (if any). Retrospective certificates should be clearly identified as such⁹.
15. A certificate is intended to help to inform a receiving agency. In some circumstances the receiving agency may choose to reject your findings or recommendations. In making its decision, a receiving agency may seek clarification from you about the patient's health status. As noted above, you should usually have had a conversation with the patient about the information you are permitted to disclose. In general, you should limit any additional comments to your assessment of the patient's capacity and timeframes¹⁰.

⁵ It may be useful to propose that you will withhold personal information about them and their health, but would like their permission to answer any questions about their capacity (for example about what type of work activities they may be capable of) and timeframes.

⁶ For example, when the patient works as a chef and is suffering from a food-borne illness.

⁷ For further advice on writing medical certificates for patients suffering from work-related stress, please refer to the Ministry of Business, Innovation and Employment's *Guidance note for general practitioners: Certification of patients complaining of work-related 'stress' problems*.

⁸ It may often be difficult for you to gauge the type of work a patient does, especially if you do not have access to their detailed job description or workplace job task sheet. The patient and their employer are often in a better position to decide how your clinical opinion applies to their particular situation. It is therefore often important to focus your attention on those activities the patient can and cannot safely undertake, rather than on whether or not the patient is capable of working. For example, it may not be accurate to write a sickness certificate saying that a truck-driver with a broken leg "is unable to work" if part of the patient's job involves office work and he or she remains capable of doing that work. Instead, it is likely to be more useful for you to advise the employer in your certificate that the patient "is unable to drive a truck".

⁹ When writing a retrospective certificate you should pay particular attention to ensuring that the certificate distinguishes between any clinical observations and patient comment. You should also avoid providing an opinion about the patient's incapacity if you do not have sufficient clinical evidence to do so.

¹⁰ In such circumstances the most useful approach for a receiving agency may be to ask "In your clinical judgement would you consider that the patient is capable of [activity X]?" or "The patient has recently been able to do [an activity]. Given this, would your clinical judgement be that the patient is now fit to [alternative work tasks or hours]?" It may also be useful to provide the doctor with a list of alternate duties and a description of the workplace support available to assist them in answering questions about the patient's capacity. The receiving agency should also be aware that the doctor may not be able to provide it with information unless the patient has consented to its release. The doctor might also be unable to answer specific questions about the patient's capacity, and advice from an occupational medicine specialist or other specialist may be needed.

Statutory obligations – death

16. Certifying death is a statutory obligation and service provided to the Registrar of Births, Deaths, & Marriages.
17. Under section 4 of the Births, Deaths and Marriage Registration Amendment Act 2000 the doctor who attended the patient during the illness, and if satisfied the death was due to natural consequences of that illness, must complete a certificate “immediately after the doctor learns of the death”. A body cannot be released to the family until you have certified the death, and in some cultures (particularly Maori culture) it is culturally very important for that to occur quickly.
18. Another doctor may complete the death certificate if satisfied the death was due to natural consequences of the illness and the doctor who last attended is:
 - unavailable - defined under the Act as “dead, unknown, missing, of unsound mind, or unable to act by virtue of a medical condition”;
 - unlikely to be able to give a certificate within 24-hours of the death;
 - has not given a certificate and 24-hours has passed since the death;
 - not withholding the doctor’s certificate because he or she is not satisfied that the death was due to natural consequences.
19. Before you complete a certificate for the death of a patient who was not under your care, you must give due consideration to the patient’s records and give regard to the circumstances of the patient’s death.

Statutory obligations – mental health

20. Under the Mental Health (Compulsory Assessment and Treatment) Act 1992 anyone who believes that a person may be suffering from a mental disorder may fill out an application form asking the Director of Area Mental Health Services for an assessment of that person. Under section 8B of the Act such an application must be accompanied by a medical certificate.
 21. If you are asked to complete a certificate to accompany an application to the Director of Area Mental Health Services you must examine the patient and form a view about whether the patient may be suffering from a mental disorder.
 22. If you consider that there are reasonable grounds for believing the patient may be suffering from a mental disorder, you must issue a certificate.
 23. The certificate must state:
 - your identity
 - that you have examined the person
 - the date the person was examined
 - that you consider that there are reasonable grounds for believing the person may be suffering a mental disorder
 - the full particulars of the reasons for that opinion, explaining in what way you believe that the person’s condition may come within the statutory definition of a mental disorder
 - that you are not related to the person or to the person requesting the assessment (unless you are the person requesting the assessment).
 24. After considering the application and the certificate you completed, the Director of Area Mental Health Services will determine whether a compulsory assessment is necessary. A compulsory assessment will be undertaken by an approved doctor (usually a psychiatrist) in accordance with section 9(3) of the Act.
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Charging for certificates

25. Completing a certificate entails investigation and responsibility, however if you charge an additional fee for this service then that fee must be reasonable and should not exploit the vulnerability or lack of medical knowledge of the responsible person or agency. Information about charges must be clearly displayed or given to the person paying for the service prior to consultation.

Notes

The Ministry of Health's publication *Guide to Writing Death Certificates* outlines the practicalities of completing death certificates.

The Ministry of Business, Innovation and Business provides advice for doctors, employers and employees on medical certification for the purpose of obtaining sick leave under the Holidays Act 2003.