



Application for Approval Injury Management Consultant

Preamble

An Injury Management Consultant (IMC) is a physician, physiotherapist or chiropractor approved by the Superintendent of Insurance in Alberta as a designated resource to patients and their primary healthcare providers in the assessment and treatment of sprains, strains and whiplash-associated-disorders arising from motor vehicle collisions.

An IMC will:

- receive referrals in the appropriate form from primary healthcare providers;
- assess referred patients through review of health information provided and by conducting a health history and a physical examination necessary to evaluate the sprain, strain and/or WAD injury and its effect on the patient;
- request and review diagnostic tests deemed necessary to complete the assessment of these injuries;
- establish a diagnosis within the framework of the prescribed Diagnostic and Treatment Protocols;
- provide a written report to the referring practitioner and the client's insurance company containing the IMC's findings, the diagnosis and his or her recommendations for treatment and/or further evaluation.

An IMC may assess and provide recommendations on other injuries or health matters and may elect to provide treatment for any health condition but that those actions, though permitted, fall outside the role of the IMC as defined in the regulations.

An IMC will conduct their duties in accordance with the professional and ethical standards established by their professional regulatory body.

Definitions

Biopsychosocial model of disability (excerpted from *The International Classification of Functioning, Disability and Health* adopted by the World Health Organization in 2002).

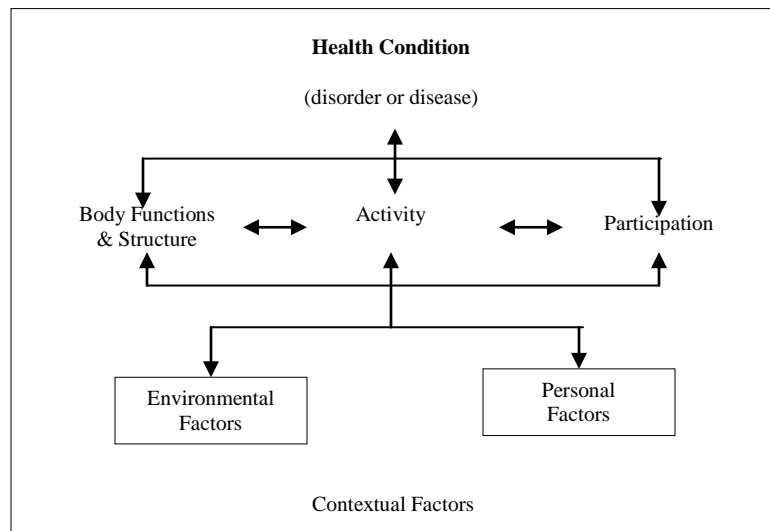
A medical model of disability views disability as a feature of the person, directly caused by disease, trauma or other health condition, which requires medical care provided in the form of individual treatment by professionals. Disability, on this model, calls for medical or other treatment or intervention, to 'correct' the problem with the individual.

The social model of disability, on the other hand, sees disability as a socially created problem and not at all an attribute of an individual. On the social model, disability demands a political response, since the problem is created by an unaccommodating physical environment brought about by attitudes and other features of the social environment.

On their own, neither model is adequate, although both are partially valid. Disability is a complex phenomena that is both a problem at the level of a person's body, and a complex and primarily social phenomena. Disability is always an interaction between features of the person and features of the overall context in which the person lives, but some aspects of disability are almost entirely internal to the person, while another aspect is almost entirely external. In other words, both medical and social responses are appropriate to the problems associated with disability; we cannot wholly reject either kind of intervention.

A better model of disability is one that synthesizes what is true in the medical and social models, without making the mistake each makes in reducing the whole, complex notion of disability to one of its aspects.

This more useful model of disability might be called the biopsychosocial model which provides a coherent view of different perspectives of health: biological, individual and social.



As the diagram indicates, disability and functioning are viewed as outcomes of interactions between health conditions (diseases, disorders and injuries) and contextual factors.

Among contextual factors are external environmental factors (for example, social attitudes, architectural characteristics, legal and social structures, as well as climate, terrain and so forth); and internal personal factors, which include gender, age, coping styles, social background, education, profession, past and current experience, overall behavior pattern, character and other factors that influence how disability is experienced by the individual.

Signature

Date

Please forward your application to:

Quality of Care Department - Registrar Approvals
College of Physicians & Surgeons of Alberta
2700, 10020 - 100 Street NW
Edmonton AB T5J 0N3

Email: tanya.wicks@cpsa.ab.ca / Phone: (780) 423-4764 / Toll Free: 1-800-320-8624 / Fax: (780) 428-2712