STEP-BY-STEP

Talking to the doctor about return to work

Q1: Doctor, your patient (EMPLOYEE NAME) is here in the office with me. That’s why I’m using the speakerphone. The purpose of our call is to see if we can find something safe and productive for (EMPLOYEE NAME) to do at work while recovering from his/her injury. Our department may be able to modify (EMPLOYEE NAME) usual job or even provide a different transitional work assignment. But first of all, is there a specific medical reason why it is unsafe or harmful for (EMPLOYEE NAME) to get out of the house, travel to work, or be in the workplace?

IF NO  

Q2: Is that a medical contraindication to (EMPLOYEE NAME) working, or are you more concerned about (EMPLOYEE NAME) comfort, stamina, safety, or the risk of reinjury at work?

IF MEDICAL CONTRAINDICATION  

Q3: What is the adverse outcome you are concerned about? [Wait for answer]. If we can think of a way to arrange things to avoid this happening, is there any reason why (EMPLOYEE NAME) couldn’t do some kind of productive work?

IF NO  

That’s great. So, let’s work together to see if we can find a way to keep (EMPLOYEE NAME) active, safe and reasonably comfortable during recovery. We all want to avoid worsening (EMPLOYEE NAME) condition or creating a health or safety risk for (EMPLOYEE NAME) or others.

IF YES  

Okay, I understand your concerns why he/she shouldn’t work as long as that risk exists. When, if ever, do you think the situation is likely to change?

Q4: What steps do you suggest we take in order to make sure that (EMPLOYEE NAME) is safe (or as comfortable as possible) at work? Are there any specific activities, tasks, or environments that we need to avoid or special precautions we need to take?

Q5: Is there any information you are missing that I can get for you? For example would you like some more objective information about (EMPLOYEE NAME) current strength or stamina, or the exact nature of the job or tasks (EMPLOYEE NAME) will be doing during the recovery period?

Let me give you my phone number and the phone number of the Return to Work Specialist in our Health Care and Benefit Division. If (EMPLOYEE NAME) reports any problems at work during recovery, please get in touch with us right away so we can help. Is there anything else you need in order to feel comfortable that (EMPLOYEE NAME) will be appropriately monitored and protected on transitional duty?