



Paperwork and medical certificates

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Doctor, can you fill out a referral form so that I can get massage therapy?"

"OK, but why can't you go book an appointment yourself?"

"Because without a referral, my insurance would not reimburse me for the massage."

"Doctor, can you write me a referral so that I can see my specialist?"

"OK, but you are already being seen by that specialist. Why not just go directly to him?"

"I know, but he is requesting a new referral because it has been a year since I last saw him."

"Doctor, I had to be away from work last week. Can you write me a doctor's note?"

"OK, but what was the reason?"

"I hurt my back and could not go to work. Without a note, my employer will not approve my sick leave."

"Doctor, Doctor, Doctor ...!"

How many notes and certificates of all kinds are we required to complete in a day? Dozens and dozens: certificates of health; doctor's notes for sick days; return-to-work notes; insurance forms; disability forms; government forms related to labour, employment, and social security; tax credits; pensions; parking permits ... and on and on it goes. I could easily fill this entire page listing all the forms and certificates family physicians are asked to fill out. Personally, it feels like I spend hours and hours on them daily. And I am not the only one who feels that way.¹⁻³ One would think that family physicians are the guarantors of all leaves of absence and all medical conditions in this world.

But are all these forms necessary? And are they pertinent?

Why do statin prescriptions need to be renewed every year (or every 2 years)? Barring a few exceptions, persons with a high cholesterol level and an elevated risk of cardiovascular disease must continue taking this medication for the rest of their lives, do they not?

Why must test strips and lancets for self-managing diabetes be re-prescribed? Is there an underground economy for test strips and lancets that I am unaware of?

Why does a form need to be filled out for a patient with dementia to access donepezil? And why does the

request need to be renewed every year along with performing a Mini-Mental State Examination or Montreal Cognitive Assessment? Are private and public insurance providers worried about elderly people with dementia abusing these drugs and throwing donepezil raves in their long-term care and seniors' homes?!

Do not even talk to me about e-consultations! Have you seen the thousand and one requirements necessary for a patient to see a specialist? You could argue that these forms were specifically created to be rejected. There is always something wrong: either a prerequisite deemed essential is missing or there is a disagreement on the priority level assigned to the application, which means that the attending physician, in this case a family doctor, must start all over again. It's like being in Asterix's "place that sends you mad."⁴ We are a long way from the days when we could simply ask a specialist colleague for help.

Make no mistake. These forms, these certificates, and all this paperwork we are endlessly asked to complete are not just minor or trivial concerns. Countless family physicians have complained about the burden of these tasks.

It is therefore not surprising that so few residents choose family medicine.⁵ It is not surprising that many family physicians leave patient practices for episodic care, such as walk-in or advanced access clinics. Neither is it surprising that some family physicians charge higher fees for completing all these forms.

Given the bureaucratic burden of the increasing paperwork and medical certificates in family medicine, this issue surely warrants more attention.

The opinions expressed in editorials are those of the authors. Publication does not imply endorsement by the College of Family Physicians of Canada.

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