

200-1881 Scarth St., Regina, SK S4P 4L1

Phone: 306.787.4370 Toll free: 1.800.667.7590 Toll free fax: 1.888.844.7773

wcbsask.com

**ECMRP** 

## **Certificate for Medical Review Panel examination**

Section 59(3) of <u>The Workers' Compensation Act, 2013</u>, requires that a request for a Medical Review Panel examination "must be accompanied by a certificate of a physician or chiropractor that:

- (a) states that, in his or her opinion, there is a genuine medical question to be determined;
- (b) sets out the aspects of the board's determination of the medical question that the physician or chiropractor disagrees with; and
- (c) provides sufficient particulars of the question to define the matters at issue."

Please refer to our fact sheet, <u>Information for physicians and chiropractors: completing an enabling certificate for a Medical Review Panel</u>, for guidance on completing the certificate.



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## **Certificate for Medical Review Panel examination**

Attention: Assistant to the board, board services			
Re:	Name of worker:		
	Worker's claim number:	_	
I, Di	rPrint name	of	Address
(a)	Certify, that in my opinion a decision made by the B		hat I disagree with is (this must refer to
(b)	I disagree with this medic	al decision because:	
(c)			either medical research that supports sician which supports my position:
Doc	tor's signature:		Date:

\* Attach additional pages if you require more space.

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