

SECOND INDEPENDENT MEDICAL EVALUATION (SIME) FORM

INSTRUCTIONS: (1) Complete all applicable sections of this form ON BOTH SIDES, (2) list the specifics which reflect the SIME dispute in columns four and seven, (3) file this form and one copy of the medical reports reflecting the medical dispute with the appropriate Board office in accordance with 8 AAC 45.072 and (4) file a Request for Conference form. If this form is not signed by all parties, the party preparing this form must serve a copy of this form and the attachments upon all other parties in accordance with 8 AAC 45.060.

Employee's Name		Employer's Name		Date of Injury		AWCB Case No
Body Parts in dispute:	Attending Physician(s) Names 1. 2. 3.			Employer Independent Medical Evaluation (EIME) physician(s) Names 1. 2. 3.		
1 Dispute(s) / Issue(s)	2 Phy. No.	3 Report Date	4 Medical Opinion (include report page and item/paragraph #)	5 Phy. No.	6 Report Date	7 Medical Opinion (include report page and item/paragraph #)
Causation						
Compensability						
Treatment (list disputed time periods in Col 4 & 7)						
Degree of Impairment (state the percent of impairment in Col 4 & 7)						
Functional capacity (attach job description)						
Medical stability (list disputed time periods in Col 4 & 7)						

SECOND INDEPENDENT MEDICAL EVALUATION (SIME) FORM (continued)

1	2	3	4	5	6	7
Dispute(s) / Issue(s)	Phy. No.	Report Date	Medical Opinion (include report page and item/paragraph #)	Phy. No.	Report Date	Medical Opinion (include report page and item/paragraph #)
Ability to enter a reemployment plan (attach plan)						
Non-SIME issue(s) (AS 23.30.110 (g) request)						

What medical specialty is required for the SIME?

Has the employee been seen by any of the following physicians, on the Board's list of examiners, or at the facility where they work? (if yes, check the applicable box)

- | | |
|--|--|
| <input type="checkbox"/> Leonard A. Brant, M.D., F.A.C.S. (urology)
<input type="checkbox"/> William S. Breall, M.D. (cardiology)
<input type="checkbox"/> Charles N. Brooks, M.D. (orthopedic surgeon)
<input type="checkbox"/> Paul Brown, M.D. (rheumatology)
<input type="checkbox"/> Scott H. Calzaretta, D.C. (chiropractic)
<input type="checkbox"/> Anthony Buy Corkill, M.C. (neurosurgery)
<input type="checkbox"/> Timothy J. Craven, M.D. (occupational medicine)
<input type="checkbox"/> Don Gregory Davis, D.C. (chiropractic)
<input type="checkbox"/> Thomas Dodson, M.D. (forensic psychiatry)
<input type="checkbox"/> James R. Downey, M.D. (urology)
<input type="checkbox"/> Ronald G. Early, M.D. Ph.D. (psychiatry)
<input type="checkbox"/> Robert F. Foran, M.D. (vascular surgery)
<input type="checkbox"/> Carol Frey, M.D. (orthopedic, foot/ankle)
<input type="checkbox"/> Stephen Fuller, M.D. (orthopedic surgeon)
<input type="checkbox"/> Alan R. Greenwald, M.D. (orthopedic surgeon)
<input type="checkbox"/> Thomas H. Gritzka, M.D. (orthopedic surgeon)
<input type="checkbox"/> Kenneth J. Hammerman, M.D. (gastroenterology internal medicine)
<input type="checkbox"/> Dana Headapohl, M.D. (occupational medicine)

<input type="checkbox"/> Richard Hogson, M.D. (otolaryngology)
<input type="checkbox"/> Edward Holmes M.D. (occupational medicine)
<input type="checkbox"/> Craig B Johnson, D.C. (chiropractic)
<input type="checkbox"/> James C. Klein, M.D., D.D.S. (otolaryngology/ oral and maxillofacial surgery)
<input type="checkbox"/> Sanford A. Lazar, M.D. (orthopedic surgeon)
<input type="checkbox"/> Larry A. Levine, M.D. (physical medicine and rehabilitation) | <input type="checkbox"/> Walter Ling M.D. (neurology/psychiatry)
<input type="checkbox"/> John J. Lipon, D.O. (orthopedic surgeon)
<input type="checkbox"/> Thomas G. Martin, M.D. (toxicology)
<input type="checkbox"/> Bruce McCormack, M.D. (neurosurgery)
<input type="checkbox"/> John G. McDermott M.D. (orthopedic surgeon)
<input type="checkbox"/> Allene Morris-Scott, M.D. (occupational and environmental medicine)
<input type="checkbox"/> Neil Pitzer, M.D. (physical medicine and rehabilitation)
<input type="checkbox"/> Paul Puziss, M.D. (orthopedic surgeon)
<input type="checkbox"/> Daniel M. Raybin, M.D. (pulmonary)
<input type="checkbox"/> William A. Ross, D.C. (chiropractic)
<input type="checkbox"/> Alan C. Roth, M.D. (physical & rehabilitation medicine)
<input type="checkbox"/> Peter F. Roy-Byrne, M.D. (psychiatry)
<input type="checkbox"/> Jonathan S. Schleimer, M.D. (neurology)
<input type="checkbox"/> Leslie Schofferman, M.D. (pain management)
<input type="checkbox"/> Judy Silverman, M.D. (physical medicine/pain management)
<input type="checkbox"/> Morley Slutsky, M.D. (occupational medicine)
<input type="checkbox"/> Douglas G. Smith, M.D. (orthopedic surgeon)
<input type="checkbox"/> Samuel M. Sobol, M.D. F.A.C.C. F.A.C.P. (cardiology, cardiovascular disease, internal medicine)
<input type="checkbox"/> Paul L. Steer, M.D. F.A.C.P. (internal medicine & infectious diseases)
<input type="checkbox"/> Kenneth Swayman, D.P.M. (podiatry medicine and surgery)
<input type="checkbox"/> Ronald N. Turco, M.D. (psychiatry)
<input type="checkbox"/> Christopher S. Wilson, M.D. (hand and upper extremity surgery)
<input type="checkbox"/> Leon Zeitzer, M.D. (otolaryngology) |
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Employee Employer (each party must check applicable boxes. If the parties agree on any statement below, it constitutes a stipulation under 8 AAC 45.050).

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | - Based upon the above information, an SIME dispute exists under AS 23.30.095(k) |
| <input type="checkbox"/> | <input type="checkbox"/> | - The right to have the <u>board</u> determine the need for an SIME is waived. A workers' compensation officer or the <u>board</u> designee may decide whether or not to order an SIME. |
| <input type="checkbox"/> | <input type="checkbox"/> | - Non-SIME issues, noted above, should be submitted to the board's examiner under AS 23.30.110(g). The right to have the <u>board</u> require an examination is waived. A workers' compensation officer or the board's designee may decide whether or not to order an examination, in conjunction with an SIME, under AS. 23.30.110(g). The employer will pay for the cost of this examination. An examination by the board's examiner is considered to be an SIME. No subsequent SIME will be ordered on the non-SIME issues noted above. |
| <input type="checkbox"/> | <input type="checkbox"/> | - This form amends the issues in an active application or petition previously filed by a party. The requirement to serve and file an answer to the application or petition as amended by this SIME form, is waived. |

IF THERE IS NO ACTIVE APPLICATION OR PETITION IN THIS CASE, THE PARTY PREPARING THIS FORM MUST ATTACH AN APPLICATION OR PETITION TO COMMENCE PROCEEDINGS

Signature(s) _____ Date _____
 Employee or representative Employer, Insurer or representative Date _____