

# MEDICAL evaluation of sick leave relevancy



## Stages of the evaluation leading to a over one-week sick leave.

Medical consultation with or without appointment	Second medical consultation	Evaluation tools
Medical evaluation and prescription of a sick leave lasting one or two weeks, concurrent with a pharmacological treatment, if necessary.	Meeting between the doctor and the patient to reach an agreement regarding: <ul style="list-style-type: none"> <li>● The relevance of the sick leave;</li> <li>● The duration of the sick leave;</li> <li>● The plan for the sick leave:                             <ul style="list-style-type: none"> <li>a. Medication;</li> <li>b. Joint follow-up with one or more professionals;</li> <li>c. The medical follow-up modalities.</li> </ul> </li> <li>● Modalities of delivering forms.</li> </ul>	Pros and the cons of a sick leave Differential diagnosis <ul style="list-style-type: none"> <li>● PHQ-9</li> <li>● Maslach</li> <li>● Burns inventory or GAD-7</li> </ul> Functional capabilities <ul style="list-style-type: none"> <li>● WSAS</li> <li>● Leaps</li> <li>● Chart of depressive symptoms versus functional impairment</li> </ul>
	Encourage the patient to get in touch with his workplace and with the available resources that may support him during the sick leave (e.g., employee assistance, union representative, etc.).	Inform the patient about available resources (e.g., EAPs, public or private services, etc.)

### Is a sick leave relevant?

Assess impacts in all four dimensions and document them in the file:

- Everyday life activities;
- Social functioning;
- Concentration, perseverance and rhythm;
- Complex or work-like situations in which there is an observed deterioration (functional, occupational).

## Guide to depressive symptoms versus functional impairment

	Clinical symptoms and/or adverse drug reactions	Functional impact at work	Examples of observable behaviours
<b>Mood</b>	<ul style="list-style-type: none"> <li>● Irritability</li> <li>● Sadness</li> <li>● Anxiety</li> <li>● Agitation</li> </ul>	<ul style="list-style-type: none"> <li>● Conflicts</li> <li>● Inability to control emotions</li> <li>● Avoidance</li> </ul>	<ul style="list-style-type: none"> <li>● Frequent crying at work</li> <li>● Anger outbursts</li> <li>● Panic attacks</li> </ul>
<b>Toughts</b>	<ul style="list-style-type: none"> <li>● Anhedonia</li> <li>● Apathy</li> <li>● Feeling of powerlessness</li> <li>● Suicidal thoughts</li> </ul>	<ul style="list-style-type: none"> <li>● Withdrawal</li> <li>● Lack of motivation</li> <li>● Inability to control thought content</li> </ul>	<ul style="list-style-type: none"> <li>● Presenteeism</li> <li>● Lack of accountability</li> <li>● Difficulty meeting deadlines</li> <li>● Procrastination</li> </ul>
<b>Cognitive manifestations</b>	<ul style="list-style-type: none"> <li>● Difficulty concentrating</li> <li>● Memory problems</li> <li>● Indecisiveness</li> <li>● Daytime sleepiness</li> </ul>	<ul style="list-style-type: none"> <li>● Lack of efficiency in task performance</li> <li>● More frequent errors</li> <li>● Poor decision-making skills</li> </ul>	<ul style="list-style-type: none"> <li>● Difficulty reading or driving</li> <li>● Need to nap</li> <li>● Inability to multitask</li> </ul>
<b>Somatic manifestations</b>	<ul style="list-style-type: none"> <li>● Sleep problems</li> <li>● Changes in eating habits</li> <li>● Lack of energy</li> <li>● Dizziness</li> <li>● Headaches</li> </ul>	<ul style="list-style-type: none"> <li>● Decreased alertness during tasks execution</li> <li>● Limited range of activities</li> <li>● Negligence</li> </ul>	<ul style="list-style-type: none"> <li>● Falls, loss of balance</li> <li>● Sleepiness at work</li> <li>● Decreased stamina</li> </ul>

## Properly assess the stressors to determine the appropriate support for the patient and whether or not a sick leave would be beneficial.

Only 10% exclusively personal, 30% exclusively professional.  
Thus, the majority (60%) have stressors in both domains of their lives.

### Weigh the pros and cons of a sick leave or of an extension at each visit<sup>1-2</sup>

Pros	Cons
Remove professional stress	Risk of inactivity, structure loss, isolation which may aggravate symptoms.
Reduced risk of incidents (e.g., injuries, errors)	Reduction in activities promoting self-confidence and sense of accomplishment
Available time for recovery activities (e.g., exercises, psychotherapy)	Financial stress due to the sick leave (e.g., insurances, unemployment)
Getting out of presenteeism	Risk of anticipation anxiety increasing over time

1. Santé mentale au travail et invalidité professionnelle : lignes directrices à l'intention des médecins.

2. Bilsker, d. ET AL. *Can J psychiatry*, 2006; 51; 76-83.

### Tips on filling out forms<sup>1-2</sup>

- Be accurate in diagnoses : exact terms or "nonspecific" \*;
- Provide information on expected development and prognosis;
- Provide information on treatment supported by facts;
- Give detailed information, especially for the symptoms that may hinder professional functioning;

- Detail the noted impairments: intensity, duration, frequency (e. g., concentration for less than 30 minutes, only 1 meal/day);
- Support objective date : follow-up on questionnaires from the patient's file;
- Avoid blank spaces : write "nil" or a stroke if necessary;
- One month at a time.

### Complex case followed by a resident physician

Consider pairing the resident with a supervisor or case worker to improve the continuity of assessment and coaching of **the resident**.



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