



IME*Create™ Patent Pending

IME*Create, developed by Document Create, LLC and Christopher R. Brigham, a leading provider and well known author in the evaluation and impairment industry have created a technology tool for Physicians and referring parties that defines excellence.

IME*Create includes the resources critical to performing comprehensive impairment and disability assessments by collecting the appropriate data and providing that data to the Physician along with a worksheet to be used during the physical evaluation. This resource tool will assist Physicians in the comprehensive evaluation process and please clients with the quality results they expect.

IME*Create is developed as a web-based program which allows use from any computer that has Internet access. No need for additional software.

IME*CREATE Features;

● **Enter and track case information**

IME*Create has the web forms to review the status of existing cases as well as enter new case.

Figure 1
Sample Case List Form

The screenshot shows the IME*Create Case List Form. On the left is a sidebar with the IME*Create logo and a 'Filter Case List By:' section containing various input fields and dropdown menus. The main area features a table with the following data:

Company	Appt Date	Case Nbr	Examinee	Provider	Owning Org	Status
US Insurance Company	No Date	12345	Jane Doe	Charles Walters	IME*Create	Provider Scheduled

Once a case has been defined, you can generate an examinee questionnaire, Examiner Worksheet, and you can assign the case to a provider, transcription company, etc. to perform their work on the case over the internet from virtually anywhere.

Figure 2
Sample Case Entry Form

The screenshot shows the IME*Create Case Entry Form. On the left is a sidebar with the IME*Create logo and a list of actions: Case # 12345, Examinee Questionnaire, Examiner Worksheet, Draft Report, Report, Case Status, and a list of status options (New, Scheduled Provider, Scheduled Appointment, Examinee Questionnaire, Examiner Worksheet, Reporting, Transcription, QA, Report Complete). The main content area has tabs for Case List, Current Case, and Search Providers. Below the tabs are buttons for View Case, Page navigation (1, 2, 3), Medical Records (0), View/Edit Provider, Detach Provider, and Edit Case. The form is divided into three main sections: Case Information, Referring, and Examinee. Case Information includes Case Number (12345) and Current Status (Provider Scheduled). Referring includes Company (US Insurance Company), Client (Mr. John Smith), and Claim # (999999). Examinee includes Examinee (Mrs. Jane Doe), Social Security #, Date of Birth (1/1/1956), Sex (female), and Zip/Postal Code (48170). A legend at the bottom indicates that an asterisk (*) denotes a required field.

●Search and Select Provider

Search criteria include specialty, degree, certification, experience level, proximity, services and fees. You can also enter areas of the body or keywords to assist in the selection process.

Figure 3
Sample Provider Search Form

The screenshot shows the 'IME*Create' web application interface. On the left is a sidebar with the logo and navigation options. The main content area is titled 'IME*Create' and contains a 'Search Providers' section. This section is divided into several categories: 'Locale' with fields for State/Province, County, City, Zip/Postal Code, and Proximity; 'Specialties' with 'Available' and 'Selected' lists; 'Keywords' with 'Body Areas' and 'Other Keyword' fields; and 'Services' with various filters like Degree, Certification, and Experience. A legend at the bottom states '* = required field'.

Dynamic documents based on the case parameters;

- case type
- issues
- problem regions of the body

Each case entered into IME*Create has specific case type, issues, and problems defined. These criteria enable the IME*Create expert database engine to determine the questions that need to be asked of the examinee and the physician to perform a complete, quality examination.

The screenshot displays the 'IME*Create' software interface. On the left is a sidebar with the 'IME*Create' logo and a 'Case #': 12345. Below the case number are several menu items: 'Examinee Questionnaire', 'Examiner Worksheet', 'Draft Report', and 'Report'. A 'Case Status:' section contains a list of items with checkboxes and question marks: 'New', 'Scheduled Provider', 'Scheduled Appointment', 'Examinee Questionnaire', 'Examiner Worksheet', 'Reporting', 'Transcription', 'QA', and 'Report Complete'. Below this is a 'Tutorial' section with 'Flash' and 'Word' options.

The main content area is titled 'IME*Create' and has three tabs: 'Case List', 'Current Case', and 'Search Providers'. Below the tabs is a 'View Case:' section with a 'Page' selector (1, 2, 3), 'Medical Records (0)', and buttons for 'View/Edit Provider', 'Detach Provider', and 'Edit Case'. The 'Case Parameters' section contains the following fields:

- *Case Type: Workers Compensation
- *Medical Records for Physician: Not applicable
- 1st Date of Injury/Claim: 9/10/2003 (mm/dd/yyyy)
- 2nd Date of Injury (if Applicable): (mm/dd/yyyy)
- *Issues: Selected (Appropriateness of Care, Causation, Diagnosis, MMI)
- *Problems: Selected (Lower Extremity - Hip)
- Special Instructions / Specific Questions for physician: (empty text area)

A legend at the bottom indicates '* = required field'.

Figure 4
Sample Case Parameter Form

●Examinee History Questionnaire:

Examinee Questionnaire
Jane Example

Please answer the following questions.
When finished, click the 'Submit' button at the end of the questionnaire.

Injury/Illness Description

1. Please describe in detail what occurred at the time of your injury.

I was at work and I fell and hurt my right foot

Decline to Answer

Difficulties

2. Please describe what difficulties you experienced at the time of your injury.

Pain in my neck and my lower back

Decline to Answer

Figure 5
Sample Web-based Examinee Questionnaire Form

This web based or printed questionnaire includes general questions about the injury or illness as well as specific questions based on the type of case (i.e., workers' compensation, auto casualty or personal injury, etc.). This insures that the appropriate questions are asked so that accurate, valuable information can be used during the evaluation

●Examiner Worksheet:

Complete Cervicothoracic Range of Motion

10. Do you want to complete the cervicothoracic range of motion table?

Yes No

10.1. Enter the cervicothoracic range of motion measurements in the following table:

Measurement	Trial 1	Trial 2	Trial 3	Average	Lowest	Highest	Range
Flexion (Forward)	1	2	3	2	1	3	2
Extension (Backward)	4	5	6	5	4	6	2
Right Lateral Flexion	7	8	9	8	7	9	2
Left Lateral Flexion	2	3	4	3	2	4	2
Right Rotation	4	3	2	3	2	4	2
Left Rotation	5	6	7	6	5	7	2

Cervicothoracic Exam Results

11. Cervicothoracic examination was:

Normal Normal, with exceptions

Figure 6
Sample Page from Web-based Examiner Worksheet Form

This web page or printed document contains the responses provided by the examinee on the examinee questionnaire as well as the parameters of the case as defined by the client. It also includes physical examination questions for certain areas of the body as well applicable range of motion measurement tables. The Physician then uses this web-based or printed document during the evaluation to include additional medical information and clinical findings. When this information and findings are entered into IME*Create, a draft IME report structure is then created.

Pain Drawing and Pain Disability Index:

A pain drawing is included in IME*Create as well as the Pain Disability Index questions and each of these measures can be included if applicable.

For the questions that follow, indicate your pain level on a scale of 0(no pain) to 10(excrutiating pain):

10.7. What is your level of pain right now?

0 1 2 3 4 5 6 7 8 9 10

Decline to Answer

10.8. During the past month, what has your pain averaged?

0 1 2 3 4 5 6 7 8 9 10

Decline to Answer

10.9. During the past month, what is the lowest your pain has been?

0 1 2 3 4 5 6 7 8 9 10

Decline to Answer

10.10. During the past month, what is the highest your pain has been?

0 1 2 3 4 5 6 7 8 9 10

Decline to Answer

Figure 7
Sample Page from Examinee Questionnaire

Above are examples of the pain disability index questions from the examinee questionnaire.

Additional tests include I3, Impairment Impact Inventory and CES-D Center for Epidemiologic Studies on Depression.

•Dynamically Created Draft IME Report Structure:

Information gathered from the examinee history questionnaire as well as the Examiner Worksheet is processed by the program to create a draft report structure. The clinical findings are then entered into IME*Create and the report is ready for review by the evaluating physician. This draft report is presented as a Microsoft Word document which allows you to add information such as previous medical record information. A “voice to text” feature will be added in the near future which will reduce or eliminate transcription costs as well as enhance the turnaround time of the final report.

Two sample pages of the report are included on the next two pages.

Independent Medical Evaluation Report

Examinee: John Williamson
Identification Number: AB123456
Date of Birth: 12/27/50

Date of Examination: Monday, Jan 6 2003 10:00 AM
Examining Physician: Christopher Brigham, MD, MMS, CIME, FAADEP, FACOEM
Examination Location: Portland, Maine

Date of Injury: Monday, Jan 1 2001

Client Organization: Employers Mutual Insurance Company
Referral Source: Donna White

Diagnosis (Primary): Chronic low back pain, s/p single-level lumbar fusion

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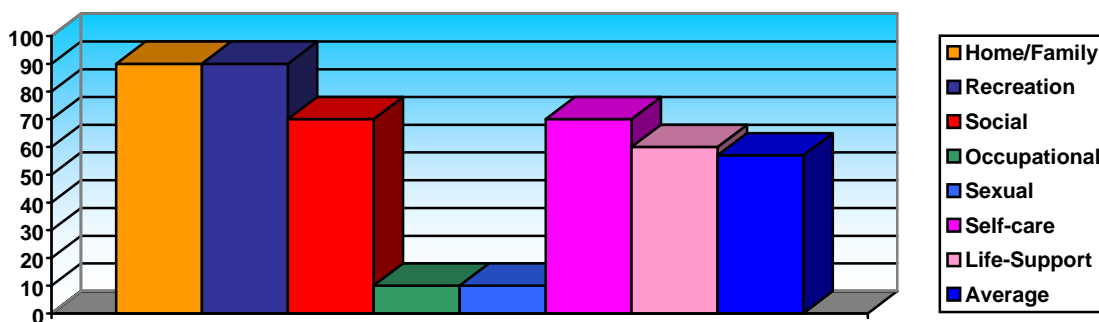
Pain Disability Index

The Pain Disability Index uses rating scales to measure the extent of disability perceived by the examinee in seven areas of life, reporting difficulties on a scale of 0 (no disability) to 10 (total disability). The following perceptions were reported by Mr. Williamson.

Family/home	Activities related to the home or family, including chores and duties performed around the house (e.g., yard work) and errands or favors for other family members (e.g. driving the children to school.)	9	90
Recreation.	Hobbies, sports and similar leisure time activities.	9	90
Social	Participation with friends and acquaintances other than family members, including parties, theater, concert, dining out, and other social functions.	7	70
Occupation	Activities that are part of or directly related to one's job, including nonpaying jobs such as that of a homemaker or volunteer work.	10	10
Sexual	This category refers to the frequency and quality of one's sex life.	10	10
Self-care	Activities of daily maintenance and independent daily living (taking a shower, driving, getting dressed, etc.)	7	70
Life-support	Basic life-support behaviors such as eating, sleeping and breathing.	6	60
Average		6	57

The Pain Disability Index was developed by Tait et al and focuses on pain-related disability. This uses 0 (no disability) to 10 (total disability) ratings of disability in seven areas of activity. These areas are family/home responsibilities, recreation, social activity, occupation, sexual activity, self-care and life-support activities. These are scored by identifying the percentage for each category and the overall level of perceived disability. Levels of reported disability which are disproportionate to impairment and clinical assessment suggests behavioral overlay. According to Tait high scores relate to "time spent in bed, psychosomatic symptoms, stopping activities because of pain, work status, pain duration, usual pain intensity, quality of life, pain extent, and education." The measure possesses both test-retest reliability and validity as for pain-based disability.

The average percentage of 57% is consistent with a perception of severe disability.



Whether you are a Physician or a referring client, IME*Create is the product that you have been waiting for and will deliver the high quality, comprehensive reports that you desire.

Please call 1-800-898-0333 to schedule your on line demonstration of IME*Create.

IME*Create Price List

IME*Create Annual Fee: \$395

Report Packages: Price breaks apply based on monthly usage, i.e., if you use 1-49 in a month the cost is \$49, if you use 50-99 in a month the cost is \$47, etc. Usage is calculated and billed at the end of each month.

1-49	\$49.00 each
50-99	\$47.00 each
100-499	\$43.00 each
500-1999	\$40.00 each
2000+	Quoted as requested

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