



Practitioner Health

Assessment Framework

Physicians and physician assistants (PAs) have a duty to undergo an ongoing assessment of their health and competence to practice medicine, which involves a life-long process over the course of their careers. The Washington Medical Commission (WMC) recommends physicians and PAs participate in regular health evaluations as part of their ongoing professional responsibility. These health evaluations should include, physical, psychological, cognitive, screening, and substance use components and assessments should be individualized to the job-specific demands of the physician or PA's practice such as eyesight and manual dexterity evaluations for those performing surgical procedures.

The WMC recommends that physicians and PAs begin regular health evaluations upon completion of their first certification cycle (ABMS for physicians or NCCPA for physician assistants). If a physician or PAs does not have a certification cycle,¹ they should initiate a health evaluation upon completing their postgraduate training. These initial evaluations may serve as a baseline metric for future comparison during the physicians or PA's career.

Physicians and PAs who participate in recertification may find it convenient to do these assessments in conjunction with their recertification process, which generally occurs every seven to ten years. The WMC generally recommends physicians and PAs increase the frequency of these evaluations --to coincide with the increase in risk of developing limitations-- as they age. Those with chronic conditions or with disabilities that might impair safe practice should consider increasing the frequency of their assessments, regardless of age, to better enable monitoring of status changes.

Age	Minimum Recommended Frequency of Health Evaluations
25-54	Health evaluations every 5-7 years
55-64	Health evaluations every 2-5 years
65-74	Health evaluations every 2 years

¹ A practitioner may not have a certification cycle if the practitioner has a lifetime certification or if the practitioner pursued certification, but did not attain certification.

≥75	Health evaluations every year
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Practice Modification

With enough time in practice, a physician or PA will eventually encounter a point when their skills begin to decline. Such decline might be due to a physical limitation such as hearing loss or a tremor, or a cognitive limitation associated with normal aging or early dementia. Age or health-related decline in practice performance may impact a practitioner’s ability to practice safely. Other causes of impairment, such as untreated mental illness and/or substance use disorder, also may create a risk of harm to patients. Regardless of etiology, it is important for the physician or PA, and those in their practice setting, to recognize signs of impairment and intervene in support of the health of the physician or PA and the safety of the patients under their care.

Physicians and PAs should also be aware of the detrimental effects of burnout, a psychological response to chronic work-related stress, which may similarly impact their ability to practice safely. Burnout may be experienced as irritability, low frustration tolerance, exasperation, fatigue, dreading work, callousness toward patients, interpersonal conflicts, diminished social functioning, and existential doubts about career or life choices. If signs of burnout are present, the WMC recommends that practitioners take active measures to address issues related to burnout (both cause and effect) as quickly as possible. This may involve identifying contributing sources of burnout in the practice environment and working collaboratively with leadership to mitigate these issues. In certain cases, burnout may involve mentally or physically burdensome responsibilities that need modifications to not only alleviate burnout, but also to minimize the health risks they may impose on physicians or PAs and their patients.

The Washington Physicians Health Program (WPHP) can provide further evaluation and assistance to physicians and PAs when there is concern that a health condition may threaten the safe practice of medicine. Regardless of the cause (skills decline, mental illness, substance use disorder, or burnout), the WMC recommends physicians and PAs consider altering their practices when practitioner responsibilities become mentally or physically burdensome or present a risk to patients. Physicians and PAs may consider practice modifications, such as reducing or eliminating overnight call schedules, mandating call recovery periods, shifting into part-time practice, reducing office hours, and/or eliminating certain procedures. The WPHP encourages physicians and PAs to reach out should they seek further evaluation or assistance in identifying reasonable practice modifications.

Conclusion

The WMC encourages all physicians and PAs to undergo regular health evaluations to gauge their ability to practice safely over the course of their careers. Additionally, throughout their careers, physicians and PAs should self-monitor and seek evaluation if they develop signs of skills decline, cognitive impairment, mental illness, or substance use disorder. Further, physicians and PAs should monitor for signs of burnout and mitigate issues related to burnout as they arise.

With appropriate consideration of current health, burnout, and ability status, physicians and PAs can usually modify their practices, as necessary, to extend fruitful and satisfying careers. The WMC strongly supports all physicians and PAs in proactively evaluating their health and competence on a regular, career-long basis, and

utilizing results to adapt their practice as needed to maintain patient safety. The WPHP can provide further evaluation and assistance to practitioners to help ensure safe practice.

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