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| Print Monitored Person's Name | Print Potential Evaluator's Name | Date |
| Monitored Person's Signature | Potential Evaluator's Signature | Evaluator's Phone # |
| Practice Name: | Practice Address: | |

| Monitored Person's Initials | Evaluator's Initials | By our initials, we acknowledge and agree to the following: |
|-----------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | <ul style="list-style-type: none"> The Board Order entered against the requester requires the following comprehensive evaluation: <input type="checkbox"/> psychiatric <input type="checkbox"/> psychological <input type="checkbox"/> neurological <input type="checkbox"/> mental health <input type="checkbox"/> substance abuse <input type="checkbox"/> physical <input type="checkbox"/> other: |
| | | <ul style="list-style-type: none"> The purpose of the evaluation is to provide the Board with a thorough and timely report to assist the Board to determine whether, and under what conditions, if any, the requester may be safe and competent to practice his or her profession. |
| | | <ul style="list-style-type: none"> The evaluator is qualified to conduct this type of evaluation, and agrees to conduct the required type of evaluation, to provide a full, timely report of such to the Board for its consideration, to include: 1) diagnoses, 2) prognoses, 3) treatment recommendations, and 4) the evaluator's professional opinion regarding the monitored person's ability to safely practice. |
| | | <ul style="list-style-type: none"> The evaluator must be Board-approved <u>before</u> conducting this evaluation, and so must first provide the Board with their license number and current <i>curriculum vitae</i>. |
| | | <ul style="list-style-type: none"> The evaluator's license(s) are current, and unrestricted. The evaluator has never been the subject of disciplinary action by any licensing board; exceptions should be detailed on the back of this form, and documents provided. |
| | | <ul style="list-style-type: none"> To date, any relationship between the evaluator and requester has been: <input type="checkbox"/> none <input type="checkbox"/> social <input type="checkbox"/> personal/family member <input type="checkbox"/> professional <input type="checkbox"/> provider/patient <input type="checkbox"/> treatment of family member |
| | | <ul style="list-style-type: none"> Before Board approval, the requester should provide Compliance with a signed <i>Authorization for Release of Information</i> form and sign any releases required by the evaluator to allow for free communication between the evaluator & Board & Compliance staff. |
| | | <ul style="list-style-type: none"> The evaluator may call and speak with Compliance staff before conducting any evaluation, to clarify the Board's requirements and due date for the report of evaluation. |
| | | <ul style="list-style-type: none"> Before any evaluation, the evaluator should first have read: 1) the requester's <u>entire</u> Board Order, including its <i>Findings of Fact</i>, 2) any other Orders entered against the requester by any Board, and 3) any other documents required by the Order. The evaluator should obtain and refer to any other pertinent records to ensure the evaluation is not based solely on self-reports. <i>Virginia Board Orders may be obtained online at: https://dhp.virginiainteractive.org/Lookup/Index</i> |
| | | <ul style="list-style-type: none"> The evaluator and person monitored are to discuss together beforehand the Board's requirements for the evaluation, including: deadlines, releases, costs, and reporting requirements. |
| | | <ul style="list-style-type: none"> The evaluator is to provide a copy of the report to the person monitored and discuss its results, to include diagnoses, prognoses, treatment recommendations and the evaluator's professional opinion regarding the monitored person's ability to safely practice. |
| | | <ul style="list-style-type: none"> The person monitored bears all costs for the evaluation and any report(s) to the Board. |
| | | <ul style="list-style-type: none"> The Board may decline to approve or to consider an evaluation report if the evaluation is conducted before Board-approval is obtained, in the absence of the above bulleted information, or if the report is submitted past its due date. |

FOR BOARD USE ONLY:

BOARD APPROVED

BOARD DENIED

CCM INITIALS

DATE: