

# JME RESCHEDULE APPLICATION FORM: JME PROTOCOLS

## Submitting this form

Email your completed form to [jmerequests@tac.vic.gov.au](mailto:jmerequests@tac.vic.gov.au)

If the new appointment is within 28 days, please contact the relevant TAC person who has conduct of the JME.

## Important notes

This form is to be used by lawyers rescheduling an approved Joint Medical Examination (JME) on behalf of a claimant and the TAC made under Part 3 of the *Transport Accident Act 1986* (TAA) and pursuant to the JME process as detailed in the JME Protocols 2016.

This form should not be used when cancelling an appointment. Upon receipt of this form the original JME appointment will be cancelled.

## Purpose of examination(s)

- Impairment and Serious Injury (dual purpose)
- Impairment assessment
- Serious injury assessment
- Common law
- No fault dispute (existing dispute)
- No fault (excluding impairment)

## Client details

Client name

Claim number

Date of birth

Date of accident

## Client's lawyer

Firm name

Practitioner

Firm address

  
  

Reference number

Fax number

Phone number

Email address

## Appointment details

Reschedule type (of an existing approved JME appointment):

- To a new date
- With a different examiner (of the same discipline/specialty)

Reschedule reason

## Original JME to be cancelled

|                       |  |
|-----------------------|--|
| Appointment date      |  |
| Appointment time      |  |
| Examiner's full name  |  |
| Examiner's discipline |  |

## New JME details

|  |  |
|--|--|
| New appointment date   |  |
| New appointment time   |  |
| Examiner's full name   |  |
| Examiner's discipline  |  |
| Examiner's address   |  |
| Examiner's postal address (if different to above)            |  |
| Examiner's email address                                     |  |
| Examiner's phone number                                      |  |
| Was this appointment booked through a Medico-legal provider? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

## Additional appointment needs

- Security booked – Solicitor to arrange and must discuss risk with the examiner when securing the appointment.
- Interpreter needed/booked – Solicitor to arrange and advise the examiner
- Telehealth – Solicitor to confirm with the client telehealth video conference details
- Special requirements. If yes, please choose the client's special requirements:
  - Wheelchair
  - Hoist
  - Shower chair
  - Assistance pet
  - On-site disabled parking (preferably allocated)
  - Step-free access to reception, accommodation, restaurant, etc.
  - Full wheelchair access to room or suite
  - Connecting room (shared door) for carer
  - Step-free shower with rails and chair
  - Grab rail beside the toilet (left or right side)
  - Commode (static or tilt in space)
  - Kitchenette
  - Laundry facilities
  - Other. Please provide detail:

|  |
|--|
|  |
|--|

**Travel and accommodation needs**

Taxi required – The TAC to arrange.

If yes, please choose taxi type:

Regular taxi

Maxi taxi

Consider if your client needs scooter or wheelchair accessibility.

It is preferable for the client to find their own way to the examinations. However, if your client is unable to use their pre-accident mode of transport because of their transport accident injuries, taxi travel may be reasonable.

Travel required – The TAC to arrange

If yes, what airport is most convenient for your client to travel in and out of?

Travel from airport

Travel to airport

What are the approximate departure and arrival dates and times required??

Departure date and time

Arrival date and time

If there are any other travel requirements that the TAC needs to be aware of, please add them below.

Does your client need assistance to travel?  Yes  No

If yes, please provide medical documentation specifically confirming the need for assistance.

Please also complete the carer's details below. The TAC needs these details to secure tickets with external providers (booking flights etc.).

Carer's name

Carer's date of birth

Accommodation required – The TAC to arrange

If yes, what are the preferred check in and check out dates?

Check in date

Check out date

Is your client travelling with a carer?  Yes  No

Carer's full name

Are separate bedrooms required?  Yes  No

Are separate beds required?  Yes  No

Are there any other special requirements that the TAC needs to be aware of, not captured above?

The form is completed on a without prejudice basis to promote the efficient administration of the Protocols and cannot be relied upon in any later Court or Tribunal proceedings (unless otherwise agreed).

## The TAC's privacy policy

The TAC respects the privacy of clients. The TAC will retain any information provided to the TAC as part of the JME process, and may use or disclose that information to make further inquiries or assist in the ongoing management of the client's TAC claim. The TAC may also be required by law to disclose any information provided to the TAC.

If you require further information about the TAC's privacy policy, please call the TAC on 1300 654 329 or visit our website at [tac.vic.gov.au/yourprivacy](https://tac.vic.gov.au/yourprivacy)