# COMMITTEE FOR PHYSICIAN HEALTH a division of the Medical Society of the State of New York 99 WASHINGTON AVENUE, SUITE 410, ALBANY, NEW YORK 12210 Phone: (518) 436-4723 – Instate (800) 338-1833 – Fax: (518) 436-7943

# INFORMATION FOR MONITORS

#### I. Overview

The Committee for Physician Health (CPH), a division of the Medical Society of the State of New York, provides early intervention, monitoring of rehabilitation, and follow-up assistance to physicians, residents, medical students, and physician assistants who are troubled or impaired by alcoholism, drug abuse, or mental illness. Its purpose is to aid colleagues in distress through a carefully monitored treatment plan, to restore or maintain their ability to function successfully in their professional and personal lives.

You are asked to evaluate the progress of the participant using a confidential CPH monitor report form. <u>Please submit these reports quarterly.</u> Report immediately any serious problems or concerns to the CPH Case Manager.

II. Monitoring: The Conditions for Participation, signed by the participant, acknowledges monitoring to provide a multidisciplinary view of recovery. Monitoring may include the following components:

#### A. Treatment Monitoring

Treatment may include in-patient, outpatient, and family components. The participant undergoes treatment as outlined in the plan of the treating facility. Quarterly reports covering attendance and general progress will be sent by the treatment provider to CPH. It is the responsibility of the monitor to inform CPH immediately and verbally any concerns about the participant's recovery/progress.

### B. Worksite Monitoring

The participant will meet with his/her worksite monitor on a regular basis. The monitor will send quarterly reports to CPH on observed behavior. These quarterly reports may include behavioral agreements/reports. However, the worksite monitors are not asked to monitor the participant's clinical decision-making and quality of medical practice. It is the responsibility of the monitor to inform CPH immediately and verbally any concerns about the participant's recovery/progress.

## C. Urine Monitoring

Selected participant must undergo unannounced and distributed urine, breath, or blood tests for alcohol or drugs by an approved urine monitor as part of the continuing evaluation. Failure of the participant to respond to a call by the urine monitor with in four (4) hours will be noted as a positive (+) in the participant's chart. Urine monitors are asked to include test results in the quarterly monitor reports to CPH. It is the responsibility of the monitor to inform CPH immediately and verbally any concerns about the participant's recovery/process.

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