



Guides to the Evaluation of Permanent Impairment, Sixth Edition

American Medical Association

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Updated and Enhanced: AMA Guides Sixth offers the most current guidelines for correct impairment evaluation.

Please note: This publication was reprinted in July 2009 to incorporate the Clarifications and Corrections document in its entirety. All purchases made after July 2009 will be the latest Guides Sixth edition available. Not sure? The word Reprint is on the outside, back cover of all reprinted copies.

The Guides to the Evaluation of Permanent Impairment, Sixth Edition, (Guides Sixth) from the American Medical Association, emphasizes the fundamental skills physicians need to evaluate and communicate patient impairments.

Standardized methodology is applied to each chapter to enhance the relevancy of impairment ratings, improve internal consistency and promote ease of application to the rating process. This ordered method enables busy physicians to become proficient with the ratings for multiple organ systems and anticipate how each chapter is organized and assimilates information.

The Guides Sixth applies both terminology from, and an analytical framework based on, the International Classification of Functioning, Disability and Health (ICF), to generate five impairment classes which permit the rating of the patient from no impairment to most severe. A diagnosis-based grid has been developed for each organ system that arranges commonly used ICD-9 diagnoses within the five classes of impairment severity, according to the consensus-based dominant criterion.

Functionally based histories, physical findings and broadly accepted objective clinical tests results are integrated where applicable to help physicians determine the grade within the impairment class. The result is a decision that is both transparent and reproducible.

Using the latest evidence in diagnosis and clinical tests, the Guides Sixth offers the following key features:
The latest scientific research and evolving medical opinion provided by nationally and internationally-recognized experts.

Standardized approach across organ systems and chapters.

Expanded use of diagnostic approach to help physicians consider relevant clinical tests and outcomes in performing the rating.

Required clinical information needed to rate a given condition.

Clear step-by-step grading instructions in each chapter to promote consistent scoring of impairment ratings and to improve physician consistency.

Simplified methodology presented between chapters.

Contemporary, evidence-based concepts and terminology of disablement from the ICF.

More comprehensive and expanded diagnostic approach.

Transparent process to allow the evaluator to document functional assessment, clinical tests and physician findings.

Uniform grids to help physicians calculate impairment ratings.

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