



Room for a view

Letters to a claims adjuster

The following is excerpted from a letter sent in response to an insurance company's request for information about a patient who had filed a claim for disability payments. Details have been changed to protect the patient's privacy.

Dear Claims Specialist:

Re: Ms. —
Your claim no —

I have been a family physician to Ms. — since her first pregnancy, ten years ago. She has generally been well. In the second year of our relationship

she came for seven one-hour sessions of counselling; our discussions related to her experience of hardship in her earlier life in — and to the frustrations she was experiencing in her own work as a counsellor. She showed no signs of psychopathology. I believe she benefited from the work we did and proceeded in her life with new enthusiasm and understanding. She had a second child one year ago.

This spring her husband became ill with suspected tuberculosis. Ms. — brought herself and her children for testing; she and one of her children were found to be converters and began a nine-month course of medication. Her hus-

band was later found also to have lung cancer. He returned to —, where he died a short time later. Ms. — travelled to — for the funeral. On her return to Canada, I was able to confirm that she was in good physical health, in spite of her earlier exposure to tuberculosis.

I last saw Ms. — six weeks ago, at which time I noted that she was still working out her grief reaction and displaying depressive features. This seems appropriate under the circumstances. She is a single parent of two children, and her health and that of her children has been at risk. It is natural for her to feel depressed, confused, angry and afraid. It is natural for her thoughts to dwell on her health and on her ability to provide for her children. The life she had been building has been grievously distorted, and she is doing the only reasonable thing any mother could do in these circumstances: she is drawing back, allowing herself time to grieve, and making herself a resource and comfort for her children. For her not to take the time to work this through is a direct route to later problems and illness. It is my assessment that she is unable to fulfil the requirements of her job, and that as a major part of her treatment she should be at home.

Ms. — has not received any psychiatric medication or referral from me. She has a social network in the community, from which she has sought support and understanding. I expect that she will be able to return to work in the New Year.

Please advise if I can provide any clarification or information.

Sincerely,

Russell Springate, MD, CCFP

One thousand words



Eugene Michael Finn / National Archives of Canada / PA-163732

"When preparing the formula have everything you require near at hand. It is of the utmost importance that every utensil be scrupulously clean. Wash your hands well before preparing the formula." From E. Couture, *Canadian Mother and Child*, Ottawa: 1939. p. 130.



The following is excerpted from a second, unsolicited letter sent to the insurance company after the patient's claim was turned down.

Dear Claims Specialist :

Re: Ms. ———
Your claim no ———

I am writing to elaborate on the circumstances of Ms. ———'s recent disability. I was surprised to hear that her claim was denied. The major points of contention appear to be that she did not see a psychiatrist, was not placed on psychiatric medication and was not seen by a medical practitioner for ongoing counselling and review. The rationale would seem to be that she did not manifest the typical medical model of illness. Therefore she could not really be sick, and therefore could not really be disabled.

Ms. ——— did seek counselling, but it was from friends and family. She managed to put the needs of her family foremost, and held herself together long enough to get to ———, bury her husband, comfort her children and come back home. This did not happen without tears, confusion and sleeplessness. It was not an easy process. She continues to do the emotional work required to process these events. I fail to see how she can provide her own clients with the comfort and guidance required in her own work when she herself is tearful, afraid and confused. Surely the issue here is disability, not illness behaviour. I feel strongly that Ms. ——— is unable at this time to meet the demands of her job. I also feel that she has appropriately employed medical and nonmedical help as required. With every due respect for the complex task you do, I believe a review of the decision would best serve all involved in this case.

Thank you for your consideration. Please write or call if I can clarify any points or issues.

Sincerely,

Russell Springate, MD, CCFP

The patient returned to work in due course. No disability payments were awarded.

Russell Springate is a family physician in Toronto.

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