



CRITICAL ILLNESS BENEFIT
CONFIDENTIAL PHYSICIAN'S STATEMENT
PARKINSON'S DISEASE

Group Operation
400 - 200 Main Street, Winnipeg, MB R3C 1A8 1-800-665-7076

EMPLOYER/EMPLOYEE IDENTIFICATION

Policy # _____ Employer Name _____ Claimant ID WLI _____
Employee Name _____
First Name _____ Last Name _____
NOTE: This form should only be completed after the waiting period for your illness has been satisfied. Please refer to your policy contract for the appropriate waiting period.

CLAIM AND RELATED DETAILS

1. a) On what date did the patient first consult you for this condition?

b) How long has the insured been your patient?

2. a) Was a diagnosis of Parkinson's Disease made? [] YES [] NO

b) On what date was the diagnosis made?

c) By whom was the diagnosis made? Please provide the names and addresses of other physicians consulted or hospitals attended by your patient for this condition.

3. Please provide the following details pertaining to the insured's Parkinson's Disease:

a) Clinical manifestation of rigidity

b) Clinical manifestation of tremor

c) Clinical manifestation of bradykinesia

4. What other investigations have been performed? Please provide dates and details, or reports.

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5. When did your patient first suffer symptoms of Parkinson's Disease? Please provide details and dates.

6. Please describe, including dates, any predisposing conditions or risk factors which your patient has had for Parkinson's Disease.

7. Please provide any other information that would be helpful in the assessment of your patient's claim.

***** Please provide copies of any specialist or hospital records for our Medical Director's review. *****

Our contract requires that a covered illness be diagnosed by a physician who is not related to the insured. Are you related to the patient? YES NO

_____ Physician's Name (Please Print)	_____ Phone Number
_____ Physician's Signature	_____ Date

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WHEN COMPLETE

**Please send report to: Medical Director, The Wawanesa Life Insurance Company, Group Operation,
400 – 200 Main Street, Winnipeg, Manitoba R3C 1A8**