

**MAINE WORKERS' COMPENSATION BOARD**  
**OFFICE OF MEDICAL AND REHABILITATION SERVICES**

**NOTICE TO WORKERS' COMPENSATION BOARD OF §207  
EXAMINATION(S) PERFORMED BY INDEPENDENT MEDICAL  
EXAMINER**

39-A MRSA §312 (2) specifies that §312 doctors may not conduct more than twelve §207 examinations per calendar year. Doctors must report these examinations to the Workers' Compensation Board. A copy of this form must be completed and submitted to the Board within ten days after each §207 examination.

A completed copy of this form may be sent by email to [Bernie.bean@maine.gov](mailto:Bernie.bean@maine.gov) or to the Board at:

Workers' Compensation Board  
Attn: Bernie Bean, OMRS  
27 State House Station  
Augusta, ME 04333-0027

Questions or comments may be presented to the Workers' Compensation Board by telephone at (207) 287-7086.

**§207 examiner name:** \_\_\_\_\_

**Employee name:** \_\_\_\_\_

**Employee's employer:** \_\_\_\_\_

**Name of insurer or employer requesting the exam:** \_\_\_\_\_

**Date of Examination:** \_\_\_\_\_

**Employer of person requesting exam:** \_\_\_\_\_