

Workers Compensation and Injury Management Act 2023

APPROVED FORM [s. 496]

Permanent Impairment Assessment – Assessment Request

In accordance with section 496 of the *Workers Compensation and Injury Management Act 2023* the approved form for requesting an assessment of a worker's degree of permanent impairment under section 190(1) of the Act is **Permanent Impairment Assessment – Assessment Request** in Appendix 1.

Permanent Impairment Assessment – Assessment Request in Appendix 1 is effective 1 July 2026 and registered as WorkCover WA Approved Form APIA2 – v2 [D2026/144600].

The **Permanent Impairment Assessment – Assessment Request** in Appendix 1 replaces WorkCover WA Approved Form APIA2 – v1 [D2024/36851] approved on 26 March 2024 and effective 1 July 2024.



REBECCA HARRIS
A/CHIEF EXECUTIVE OFFICER

29 April 2026

APPENDIX 1

Workers Compensation and Injury Management Act 2023

PERMANENT IMPAIRMENT ASSESSMENT — ASSESSMENT REQUEST

To

Approved permanent
impairment assessor:

Address:

Email:

Worker

Name:

Address:

Date of birth:

Phone number:

Email address:

Employer

Name:

Address:

ABN:

Contact person:

Phone number:

Email address:

Claim

Insurer:

Insurer claim number:

APPENDIX 1

Injury

Date of injury:

Description of injury:

Purpose of assessment

Permanent impairment compensation:

Common law:

Special increase in medical and health expenses general limit:

Maximum medical improvement & special assessment

Should a special assessment* be conducted if authorised by the WorkCover WA Permanent Impairment Guidelines? Yes No

(*at least 18 months has elapsed from the date of injury to the date of the assessment)

Warning: a special assessment is conducted when a worker's condition is not stable (i.e. has not reached maximum medical improvement MMI). A special assessment cannot consider any prospective change in the degree of permanent impairment that may result from future treatment, anticipated further recovery or deterioration of the worker's condition.

Carefully consider whether a special assessment is necessary in the circumstances as the assessed degree of permanent impairment is less reliable when MMI is not attained and this can affect the amount of any permanent impairment compensation payable.

Person requesting the assessment

Name:

Company name: (If applicable)

Address:

Phone number:

Email address:

Request

Please make the necessary arrangements to assess the degree of permanent impairment for the above worker in accordance with the WorkCover WA *Guidelines for the Evaluation of Permanent Impairment*.

Signed: **Date:**

(Signed by the person making the request)

Explanatory Note

If an APIA has been requested to undertake an Independent Medical Examination (IME) of a worker at the same time as an impairment assessment the APIA must ensure the worker is aware of the distinction between, and the purposes of, an IME and a permanent impairment assessment.

Where an impairment assessment and IME are intended to be scheduled and undertaken at the same time an APIA2 must be received by the APIA and an APIA3 must be used to schedule the assessment. In these circumstances the APIA must produce separate reports for the IME and permanent impairment assessment.