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Guidance

Statement of fitness for work: a guide for hospital doctors

Updated 6 April 2022

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This publication is available at <https://www.gov.uk/government/publications/fitness-for-work-a-guide-for-hospital-doctors>

Med3 forms or fit notes have changed from 6 April 2022. A new version of the fit note has been introduced and includes the name of the doctor authorising the form, rather than needing it to be physically signed.

While supplies of the new pre-printed form become available in all hospitals, the 2017 version of the fit note that requires a signature in ink will still be legally valid. Supplies of the new form may be ordered from 6 April 2022.

Hospital doctors and sickness certification

From 6 April 2022 all doctors across Great Britain will be issuing their patients with a revised Form Med 3 (Statement of Fitness for Work or fit note).

Many hospital doctors are still unaware that they should, if appropriate, issue Med 3 forms to patients in their care. Not issuing Med 3s denies patients the best care and leads to unnecessary duplication and extra work for GPs. In many cases it is the hospital doctor who is best placed to give advice on the impact of a patient's health condition on their fitness for work.

This brief guidance sets out when hospital doctors should use the new Med 3 fit note Statement of Fitness for Work.

The role of hospital doctors in issuing the Statement of Fitness for Work

Hospital doctors may need to provide all certification for social security and Statutory Sick Pay purposes for patients who are either incapable of work or who may be fit for work with support from their employer. The duty to provide a Med 3 rests

with the doctor who at the time has clinical responsibility for the patient.

Hospital out-patients

For an out-patient this will generally be the hospital doctor, except where the GP retains responsibility, for example where the patient has been referred to a hospital for an opinion or advice on their health condition. In cases where the patient's GP has not taken over responsibility for the incapacitating condition the treating clinician should issue any subsequent statements for an appropriate forward period.

Hospital in-patients

Form Med 10 should continue to be issued to cover any period that a patient is in hospital. On discharge from hospital the doctor who has clinical responsibility for the patient should provide them, if appropriate, with a Med 3 to cover a forward period. This is to avoid unnecessary referrals to GPs solely for the purpose of sickness certification.

Examples where hospital doctors should consider issuing a Med 3:

- when a patient has received treatment in Accident and Emergency and the treating doctor believes that the patient will be unable to work for over 7 calendar days, it would be appropriate to issue a Med 3 for a period consistent with the anticipated incapacity
- when a patient is receiving treatment at a fracture clinic and so does not need to see their GP for any clinical reason
- when discharging a patient from hospital, as well as issuing a Form Med 10 to cover the in-patient period, doctors should consider if the health condition will affect the patient's fitness for work for a forward period

- patients who have mental health conditions and are under regular review could also have their sickness certification integrated into this review in cases where the hospital doctor maintains clinical responsibility

Statement of Fitness for Work: the basics

The upcoming changes build on the introduction of the fit note in 2010 which brought about significant improvements over the original 'sick note'. These included:

1. including telephone consultations as an acceptable form of assessment
2. removing the option to say a patient is fit for work
3. introducing the option: 'May be fit for work taking account of the following advice'
4. increasing space for comments on the functional effects of your patient's condition with tick boxes to indicate simple things such as altered hours or amended duties that could help their return to work
5. changing the rules for issuing the statement so that, during the first 6 months of sickness, the new statement can be issued for no longer than 3 months

What is changing?

From 6 April 2022, the Statement of Fitness for Work will be revised. The key changes are:

1. Removal of the need to sign the form – since 2010 regulations have required that doctors sign the form in ink. To facilitate digital transmission of the form this requirement has been removed – although this primarily applies to primary care at present it is intended that the Statement of Fitness for Work is embedded in IT systems in Secondary care.

2. Introduction of a new 2022 version of Statement of Fitness for Work – this replaces the signature in ink with the name and profession of the issuing doctor. IT systems in primary care will auto populate this information but until this functionality is available in secondary care it will be necessary to continue to use the pre-printed forms supplied by DWP and to add your name and profession in the appropriate space.

There will be a transitional period during which both the 2017 and 2022 versions of the Statement of Fitness for Work forms will be legally valid as supplies of the new form reach all hospitals. The new forms should be [ordered from DWP \(https://www.gov.uk/government/collections/dwp-leaflets-and-how-to-order-them\)](https://www.gov.uk/government/collections/dwp-leaflets-and-how-to-order-them).

What stays the same?

- the statement can only be completed by a doctor
- you can advise your patients that they are not fit for work or may be fit for work with support from their employer
- the statement remains advice from you to your patient
- your patient can still use the statement as evidence of fitness for work for sick pay and benefit purposes
- the advice on the statement is not binding on employers

Not fit for work or may be fit for work?

The Statement of Fitness for Work allows you to advise one of two options:

Not fit for work

Where your assessment of your patient is that they should refrain from work for a stated period of time based on your clinical assessment of the impact of their health condition on their fitness for work.

May be fit for work taking account of the following advice

Where your assessment is that your patient's health condition does not necessarily mean they cannot return to work; however, they may not be able to complete all of their normal duties or hours, or they may need some support to help them undertake their normal duties.

If it is not possible for the employer to provide the support for your patient to return to work, your patient and their employer can use the statement as if you had advised 'not fit for work'. Your patient does not need to return to you for a new statement to confirm this.

Why change? Improving your patients' health through work

Evidence shows that work has therapeutic value and is generally good for physical and mental health [\[footnote 1\]](#). The longer a patient is off work, the lower their chances of getting back to work. There is strong evidence that long periods out of work are associated with poor mental and physical health, increased use of health services and poverty. In most cases an individual does not need to be 100% fit to return to work.

Evidence also suggests that people with common health conditions could be helped to return to work, as part of their recovery, following a few basic principles of healthcare and workplace management [\[footnote 2\]](#).

Further information

Further guidance on the new Statement of Fitness for Work can be found here [Fit note \(statement of fitness for work\)](https://www.gov.uk/government/collections/fit-note) (<https://www.gov.uk/government/collections/fit-note>).

Ordering more forms

Hospitals or Trusts can order replacement stock of the revised Med 3 forms direct from iON, the distributor. Further details on this process can be found here [DWP leaflets and how to order them \(https://www.gov.uk/government/collections/dwp-leaflets-and-how-to-order-them\)](https://www.gov.uk/government/collections/dwp-leaflets-and-how-to-order-them).

1. Waddell, G. and Burton, A.K. (2006), Is work good for your health and well-being? TSO
2. Waddell, G., Burton, A.K. and Kendall, N.A.S. (2008), Vocational Rehabilitation, what works, for whom and when? TSO

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