

DSP Medical Report – Impairment of Consciousness – Mild – 5 points*

Re:

Date of Birth:

This is a report on the functional capacity of the above-named and is assessed from the date their DSP application was lodged on _____.

1. Date treatment commenced / /

2. Diagnosis

3. When diagnosis made

4. Treatment/Medication

5. Reason for incapacity

6. Are the conditions(s) fully stabilised and unlikely to improve in the next two years?

Yes/No

7. Do you believe that the client has a mild impairment of consciousness?

In regard to the mild functional impact from loss of consciousness or altered state of consciousness during waking hours when occupied with a task or activity, does the client? Please circle each indicator relevant to the client and provide any further comments as necessary.

Have either,

- rare episodes of involuntary loss of consciousness, which occur no more than twice a year and do not usually require hospitalisation; or
- have episodes of altered state of consciousness, which occur no more than twice a year and do not usually require hospitalisation.

AND,

- is able to perform most activities of daily living between episodes; and
- may have restrictions on a driver's licence due to the medical condition.

Comments

8. Is the client unlikely to be fit to work 15 hours or more per week in the next 2 years?

Yes/No

9. Will the client be able to return to work in the next 2 years with further treatment or additional assistance?

Yes/No

***if the client has multiple health problems s/he may be assessed separately under other impairment table(s)**

10. If the client started a Program of Support (POS) but didn't complete it, was that because of his/her medical condition?

(A POS is for people with at least 20 points on 2 or more impairment tables run by a job/disability service provider designed to assist them to prepare for, find and keep employment)

Yes/No

11. Other Comments

Name/Signature:

Date:

Qualifications: