# DSP Medical Report – Impairment of Lower Limb Function – 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

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

Yes/No

1. Do you believe that the client has a mild functional impairment of the lower limbs?

Does at least one of the following apply to the client? Please circle each indicator that applies to the client and provide any further comments as necessary.

* the person has some difficulty walking to local facilities (e.g. shops or bus-stop); or
* the person has some difficulty walking around a shopping mall or supermarket without a rest;
* or the person has some difficulty climbing stairs;

and, at least one of the following applies:

* the person is unable to stand for more than 10 minutes;
* the person can mobilise effectively but needs to use a lower limb prosthesis or walking stick.

Comments

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

Yes/No

1. 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)**

1. 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

1. Other Comments

Name/Signature:

Date:

Qualifications: