



**MEDICAL DOCUMENTATION FORM\***  
(FOR OHD, 504, ATTENDANCE ACCOMODATION, ETC.)

Date: \_\_\_\_\_

For: \_\_\_\_\_ DOB: \_\_\_\_\_

To: **Physician,**

Thank you for your assistance in identifying health conditions that may affect this child's academic performance. If this child has been diagnosed with Attention Deficit Hyperactivity Disorder and the child is being considered for special education services, please complete the attached two-sided form.

- Please complete the following information for the above referenced student including the ICD-10-CM codes with the medical diagnoses. This will help the school understand what health conditions may be affecting the student's attendance, involvement and consequently their education. We can then determine what, if any, appropriate interventions may be needed to help meet this students' health/educational needs/goals.

**Medical Diagnoses with ICD-10-CM Codes (please list all that apply):**

**Activity limitations or restrictions (physical education, field trips, recess):**

**Implications for school attendance: (ex: projected number of absences related to diagnoses, homebound)**

- **Interventions that may be attempted at school to improve attendance.**

**Specialized health care procedures that are necessary during the school day:**

**Medications being taken (home and school) that may adversely affect attendance/performance:**

\_\_\_\_\_ **There are no known health conditions that would adversely affect school attendance/performance.**

This form can be returned to the Health Office or faxed:

- Early Childhood 674-1220, fax 674-1210
- Middle School 674-1308, fax 674-1310
- Area Learning Center 674-1050, fax 674-1060

- Sunrise River 674-1107, fax 674-1110
- High School 674-1500, fax 674-1510

**MD Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**MD Name-Printed:** \_\_\_\_\_ **Clinic:** \_\_\_\_\_  
**Phone#:** (\_\_\_\_\_) \_\_\_\_\_ -- \_\_\_\_\_ **FAX#:** (\_\_\_\_\_) \_\_\_\_\_ -- \_\_\_\_\_

\* This form requires parent release of information.