# DSP Medical Report – Impairment of Continence Function - Moderate – 10 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. Whether you believe that the client has a moderate impairment of continence function?

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

* The client has minor leakage from the bladder (e.g. a small amount of urine when coughing or sneezing) several times each day; AND, in respect of continence of the bladder has difficulties that result in interruption to tasks, work or training on most days.
* The client has major leakage from the bowel (e.g. enough faecal matter to fully soil underwear and stain outer clothes if a continence pad is not worn) in most weeks; AND, in respect of continence of the bowel has difficulties that result in interruption to tasks, work or training on most days.
* The client has a stoma, or uses a catheter or other collection device to manage their continence independently but requires frequent bag or catheter changes, or has frequent equipment failure; AND, in respect of continence aids has difficulties that result in interruption to tasks, work or training on most days.

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: