

Website: https://dspaa.com.au/

Email: admin@dspaa.com.au
Facebook group: https://www.facebook.com/groups/271411180049165/
ABN: 621 897 821 69

Guidance Notes for Medical Reports

When filling out, or creating, a report for DSP claim; please be mindful that in order to qualify a person must be:

- formally diagnosed by a MEDICAL professional,
- have exhausted all treatments that could provide a significant improvement within 2 years,
- have functional impairments that align with a severe 20 point rating section in one of the "tables".

These points must be very clearly addressed for best chance of success.

Using the relevant table rating criteria as sub headings is an ideal way to address symptoms and impairments.

*Please ensure patient has provided a copy of relevant tables with this document for appropriate referencing.

MEDICAL CONDITION DETAILS



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Patient Details:

- Patient's name
- Address

•	Date of birth
•	Centrelink Customer Reference Number (if known)
D	Diagnosis
•	State the formal diagnosis of this condition
•	Date of diagnosis
•	List any diagnostic testing/imaging/procedures confirming diagnosis, where applicable.
•	Name, qualifications and contact details of medical professional who made diagnosis
•	Is this diagnosis likely to be a lifelong condition? YES \square NO \square
Τ	`reatment *(great detail is not necessary)
•	Details of current treatment (eg medication and therapy)
•	Past treatment

Future treatment

•	Are there any reasonable (affordable, low risk, accessible, high success rate) treatments (including surgery) that are likely to produce a significant improvement in the next 2 years? YES \square NO \square
	Note: Significant functional improvement, is improvement that is likely to enable the person to undertake work in the next 2 years. Degenerative conditions that result in progressive and irreversible loss of function, can be considered stabilised if reasonable treatment is not expected to result in significant functional improvement.
•	Are there any medical issues, such as mental health conditions, that affect the patient's ability to comply with treatment recommendations. YES \Box $$ NO \Box
•	If yes please provide details
Pr	ognosis
•	Is the condition likely to persist for more than 2 years? YES \square NO \square
•	Are the impairments related to this condition likely to persist more than 2 years?
	YES□ NO□ Uncertain □
•	Is there a likelihood of deterioration over time? YES \square NO \square Uncertain \square
•	Does the patient have a terminal diagnosis? YES \square NO \square
•	Does the patient require nursing level care? YES \square NO \square
Wo	rk/study capacity
•	Does the patient have a capacity for work in an unsupported environment? YES \square NO \square
	Note: It is expected that a person will be capable of reliably performing work on a sustainable basis, that is, for a reasonable period of time (i.e. 26 weeks) without requiring excessive sick leave or work absences (of four weeks or more, in total, in any given 26 week period).
•	If yes, how many hours per week is their approximate capacity for work?
•	Does the patient have a capacity to do training or formal study? YES \square NO \square
•	If yes, how many hours per week?

Symptoms and Functional Impact

NOTE: Only those impairments that are expected to pure functional improvement from current or planned treatm	-	_	
• Is this condition episodic or fluctuating?	$YES \square$	NO □	Uncertain□
If Yes: Describe the frequency, duration compared to baseline functioning.	and seve	rity of episod	les and fluctuations
Please choose most appropriate Tables for the Please ensure patient has provided a copy of relevant	-		
☐ Table 1 - Functions requiring Physical Exe	ertion and	d Stamina	
\square Table 2 - Upper Limb Function			
□Table 3 - Lower Limb Function			
□Table 4 - Spinal Function			
□Table 5 - Mental Health Function			
☐ Table 6 - Function related to Alcohol, Drug	g and Otl	ner Substanc	e Use
□Table 7 - Brain Function			
☐ Table 8 - Communication Function			
□Table 9 - Intellectual Function			
□Table 10 - Digestive and Reproductive Fur	nction		
☐ Table 11 - Hearing and other Functions of	the Ear		
□Table 12 - Visual Function			
□Table 13 - Continence Function			
\square Table 14 - Functions of the Skin			
☐ Table 15 - Functions of Consciousness			

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Please choose a single rating level in the chosen tables, that reflects the overall impairment of the patient: Criteria to keep in mind when choosing a rating level:

- Descriptors involving performing activities only apply if the person can do the activity normally and on a repetitive or habitual basis and not only once or rarely.
- if an impairment is considered as falling between 2 impairment ratings, the lower of the 2 ratings is to be assigned and the higher rating must not be assigned unless all the descriptors for that level of impairment are satisfied;
- When assessing impairments caused by conditions that have stabilised as episodic or fluctuating a rating must be assigned, which reflects the overall functional impact of those impairments, taking into account the severity, duration and frequency of the episodes or fluctuations as appropriate.

Table #	Table #
\square Mild	\square Mild
□Moderate	\square Moderate
□Severe	□Severe
□Extreme	\Box Extreme

Please provide descriptions and examples of why this rating is chosen:

Please address all criteria for that rating level if possible.

Additional Comments:		

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Details of health professional completing the report/letter:		
Name of health professional		
• Qualifications		
• Address		
Phone Number		
Signature (they must sign their report/letter)		
• Date		
Stamp (if applicable)		
References:		
Social Security (Tables for the Assessment of Work-related Impairment for Disability Support Pension) Determination 2023 (aka The Tables): https://www.legislation.gov.au/Details/F2023L00188/Download		
Guidelines to Applying the Impairment Tables: https://guides.dss.gov.au/social-security-guide/3/6/3		
Rules for Active Participation for DSP. Determination 2014:		

Social Security Act 1991 (particularly Volume 1, Part 2.3, Disability Support Pension): https://www.legislation.gov.au/Details/C2018C00413

https://www.legislation.gov.au/Details/F2015L00001