



Carer Payment and Carer Allowance - Medical Report

(for a child under 16 years)

Child's details You will need to provide a separate report for each child — Contact Centrelink if you require additional reports.	Name Date of birth	/	/	CRN
Carer's details	Name			
	Address			
				Postcode
	Date of birth	/	/	CRN
	Phone number	()		

This report must be completed by one of the following health professionals who are currently involved in the treatment of the child:

- · a legally qualified medical practitioner
- a registered nurse
- a physiotherapist
- a registered psychologist

- an occupational therapist
- an Aboriginal health worker (in a geographically remote area), or
- a speech pathologist

Instructions for the parent/quardian (carer)

- Complete the details above.
- Make an appointment with the Treating Health Professional. When you make your appointment, please let the receptionist know that you will need this report completed.

The time taken to complete this report may be claimed by the treating doctor of the child under a Medicare item when included as part of a consultation. You may only be able to claim the consultation fee for other health professionals under private health insurance. If the Treating Health Professional does not bulk bill, your consultation fee may be more than usual because of the extra time taken to complete the report.

- Read and sign this authority to release information.
 - I give permission for medical details and clinical notes about the child to be supplied to Centrelink.
 - I understand that the report will be used to assist in assessing a claim for Carer Payment and Carer Allowance for current and future carers OR establishing eligibility for a Special Disability Trust (SDT) and may need to be released to that person(s) by Centrelink.

Carer's	signature

oai oi s	Signi	ituit			
Date					
	/	/			

Give this report to the child's doctor or treating health professional to complete.

Instructions for the Treating Health Professional

This report may be used to decide eligibility for Carer Payment and Carer Allowance and Special Disability Trust beneficiary status.

Payment for your report

We have asked the carer of the child to let you know at the time of making their appointment that they require you to complete this report. This is to ensure that you have sufficient time for the examination.

The time taken to complete the medical report may be claimed under a Medicare item when included as part of a consultation.

Completing this report

In this report you will be asked to provide details of the child's medical condition(s). Please complete all the required questions in this report. If you are a medical practitioner and have any questions about this report, call the Medicare Australia Centrelink medical forms helpline on 13 2150. All other treating health professionals should call Centrelink on 13 2717.

Carers with more than one child with a disability or medical condition

Carer Payment

Carers may qualify for a single rate of Carer Payment for two or more children OR one or two children and a disabled adult whose combined care assessment meets the eligibility requirements. A separate report will be required for each child.

Carer Allowance

Carers may qualify for a single rate of Carer Allowance for two or more children whose combined assessment meets the eligibility requirements for payment. A separate report will be required for each child.

Thank you for your assistance



Carer Payment

Carer Payment is an income support payment that provides support to people who, because of the demands of their caring role, are unable to support themselves through substantial paid employment.

Carer Allowance

Carer Allowance is a supplementary payment which is free of the income and assets tests, and is not taxable.

Carer Allowance can be paid in addition to wages, Carer Payment or any other Centrelink payment.

Special Disability Trust beneficiary status

Special Disability Trust beneficiary status is a trust established solely in order to provide for the current and future care and accommodation needs of a child with a severe disability.

1	Please advise the disability or medical condition(s) of the child:
	If a diagnosis has not yet been made, please provide a description of the condition(s).
	Primary disability or modical condition of the child

rimary (disability o	or medi	cal cor	ndition	of the	child	

Continued

Other disability or medical condition(s) of the child Did the disability or medical condition commence more than 12 weeks ago? No Go to next question Yes Go to 4 What date did the disability or medical condition commence? Is the child's condition: Permanent Go to next question Temporary Go to 6 Is the permanent condition: Non improving **Go to 7** Improving Go to 7 Is the temporary condition expected to be present for: At least 12 months Less than 12 months Does the condition require extra care and attention for 14 hours or more per week?

No Yes

Recognised disabilities and medical conditions 8 Please indicate if the child has any of the following disabilities: Moderate to severe multiple disability or moderate to severe physical disability (including neurological disability) where the child is, or is likely to be, dependent for mobility indoors and outdoors from the age of three onwards Please select one of the following where appropriate: - Cerebral Palsy where the child is dependent on a CFR stroller, wheelchair, or walking frame Lower Limb Deficiencies where the child is dependent on a stroller, wheelchair, or walking frame Spina Bifida where the child is dependent on a stroller, wheelchair, or walking frame Other moderate to severe multiple disability or SMM moderate to severe physical disability (including neurological disability) where the child is, or is likely to be, dependent for mobility indoors and outdoors from the age of three onwards Severe multiple or physical disability (including SMS uncontrolled seizures) requiring constant care and attention where the child is less than six months of age Epilepsy that is uncontrolled while on medication Epilepsy - Absence Seizure (Petit Mal) EAS

Epilepsy - Grand Mal (Tonic-Clonic)

Epilepsy - Myoclonic Seizure

Epilepsy - Complex Seizure

Epilepsy - Simple Seizure

Continued

Chromosomal or syndromic conditions where there is moderate or severe intellectual disability and/or multiple, major and permanent physical abnormalities as diagnosed by a paediatrician, paediatric sub-specialist or clinical geneticist

Please select one of the following where appropriate:

 Angelman syndrome 	ANG
- Cri du chat syndrome	CDC
- Edwards syndrome (Trisomy 18)	EDW
- Patau syndrome (Trisomy 13)	PAT
- Prader-Willi syndrome	PWS
 Rett syndrome 	RET
- Williams syndrome	WLM
- Coffin-Lowry syndrome	COF
Congenital rubella syndrome	CRS
Cornelia de Lange syndrome	CDL
– Kabuki Make-up syndrome	KMU
- Larsen's syndrome	LAR
- Opitz G syndrome	OGS
– Pallister-killian syndrome	PKS
- Seckel syndrome	SES
- Smith-Magenis syndrome	SMG
- CHARGE association	СНА
Other chromosomal or syndromic conditions where there is moderate or severe intellectual disability and/or multiple, major and permanent physical abnormalities as diagnosed by a paediatrician, paediatric sub-specialist or clinical geneticist	ОСН
Down Syndrome	DWN
Fragile X Syndrome	FXS

EGM

EMY

JECS

ESS

Continued

Neurometabolic degenerative conditions where there is moderate or severe intellectual and/or moderate or severe physical disability and where the condition is diagnosed by a paediatrician, paediatric sub-specialist or clinical geneticist

Please select one of the following where appropriate:

a)	Lysosomal storage disorders:	
-	Krabbe's disease	KRB
-	Metachromatic Leukodystrophy	MLK
-	Pompe disease	PMP
-	Tay Sach's disease	TAY
_	Mucopolysaccharidosis:	
	Hurler's Syndrome (MPS 1)	MP1
	Hunter syndrome (MPS 2)	MP2
	Sanfilippo syndrome (MPS 3)	MP3
	Morquio syndrome (MPS IVA)	MP4
	Maroteaux-Lamy syndrome (MPS VI)	MP6
mo se dia	her Lysosomal storage disorders where there is oderate or severe intellectual and/or moderate or vere physical disability and where the condition is agnosed by a paediatrician, paediatric sub-specialist clinical geneticist	OLS
Ple	ease select one of the following where appropriate:	
b)	Neurometabolic conditions:	
_	Lesch-Nyhan Syndrome	LNS
-	Menkes Disease	MEN
-	Zellweger syndrome and related peroxisomal disorders	ZPD
mo ser res	her Neurometabolic conditions where there is oderate or severe intellectual and/or moderate or were physical disability including some mitochondrial spiratory chain disorders and where the condition diagnosed by a paediatrician, paediatric subecialist or clinical geneticist	ONC

Continued

Neurodegenerative disorders where there is moderate or severe intellectual and/or moderate or severe physical disability and where the condition is diagnosed by a paediatrician, a paediatric sub-specialist or clinical geneticist

Please select one of the following where appropriate:

-	Ataxia Telangiectasia	ATT
-	Unclassified Leukodystrophies	LEU
m se dia	ther Neurodegenerative disorders where there is oderate or severe intellectual and/or moderate or evere physical disability and where the condition is agnosed by a paediatrician, paediatric sub-specialist clinical geneticist	OND
Αı	ny of the following neuromuscular conditions:	
_	Autosomal recessive muscular dystrophy	AMD
_	Duchenne (or Becker) muscular dystrophy	DUC
_	Friedreich's ataxia	FAD
_	Spinal muscular atrophy conditions (e.g. Werdnig-Hoffman)	SMA
di cł Tł	oderate, severe, or profound intellectual sability where IQ is less than 55 (including a nild with a known syndrome) ne following, (not including Pervasive Developme	LIQ nt
Di i)	sorder) when diagnosed: by a psychiatrist, developmental paediatrician, or psychologist experienced in the assessment of Pervasive Developmental Disorders; and	a
ii)		
,	using the current Diagnostic and Statistical Manual of Mental Disorders (DSM)	al
_	•	a l
- -	of Mental Disorders (DSM)	
_ _ _ Th	of Mental Disorders (DSM) Autistic disorder	AUT
_ _ _ Th	of Mental Disorders (DSM) Autistic disorder Asperger's disorder ne following conditions diagnosed by a	AUT
_ _ _ Th	of Mental Disorders (DSM) Autistic disorder Asperger's disorder de following conditions diagnosed by a sychiatrist using the current DSM:	AUT

Continued Any of the following sensory impairments: Bilateral blindness where: BLB i) visual acuity is less than or equal to 6/60 with corrected vision, or ii) visual fields are reduced to a measured arc of less than 10 degrees Hearing loss — a 45 decibels or greater hearing impairment in the better ear, based on a 4 frequency pure tone average (using 500, 1000, 2000 and 4000Hz) Deaf-blindness — diagnosed by a specialist DFB multidisciplinary team, including a professional audiological and opthalmological evaluation The following dermatological conditions: a) Epidermolysis Bullosa Dystrophica EBD b) One of the following types of Ectodermal Dysplasias: These are specific terms and do not apply to other ectodermal dysplasia which may have some degree of reduced sweating. Hypohidrotic ectodermal dysplasia (synonym: anhidrotic ectodermal) Hay Wells syndrome (synonyms: HWS ankyloblepharon, ectodermal dysplasia and clefting [AEC]) c) One of the following severe congenital ichthyoses: Lamellar ichthyosis LAM Harlequin ichthyosis _ HAR Sjogren-larsson syndrome Netherton's syndrome NES Severe congenital ichthyosiform erythroderma Generalised bullous ichthyosis (synonyms: BIE

bullous ichthyosiform erythroderma, epidermolytic hyperkeratosis)

Diabetes Mellitus - Type 1

Phenylketonuria (PKU)

Continued	
Other inborn errors of metabolism treated by medically prescribed diet to prevent neurologic disability and/or severe organ damage	eal
Examples include Organic acidaemias, Urea cycle defects, Galastosaemia and some fatty acid or oxidation defects.	
Cystic Fibrosis	CYS
Moderate to severe Osteogenesis Imperfecta with two or more fractures per year and/or significant pain that significantly limits activiti of daily living	osi
Please indicate if the child has any of the follo medical conditions:	owing
If the child has a medical condition in this list the receive payment of Carer Allowance without fur evidence.	
Chronic or end stage organ failure where the child is receiving organ specific treatment and/or awaiting transplant	TRA
HIV/AIDS where the child is symptomatic (in addition to having lymphadenopathy) and requires treatment with a three or more drug antiviral regimen	HVA
Immunodeficiency where the child requires regular immunoglobin infusions	IMM
The following Haematological/Oncological Conditions:	
 Leukemia, Haemophagocytic Lymphohistiocystosis and other childhood malignancies where the child is undergoing chemotherapy, radiotherapy or palliative care 	СНС
Haemophilia with Factor VIII or Factor IX deficiency (less than 10%)	HAE
Thalassaemia or Haemoglobinopathy requiring chelation therapy	JTLS
Chronic Transfusion Dependent Anaemia requiring chelation therapy	
Toquing onolation thorapy	TDA

than 6 months

Severe congenital Neutropenia (Kostman's

variant, dependent on Filgrastin)

Jidd

_PKU

Continued

Any of the following chronic respiratory conditions:

-	Chronic Respiratory Disease requiring home oxygen	COA
-	A condition where the child is dependent for his or her health on an external apparatus/machine called a ventilator to assist with breathing, either on a continuous or intermittent basis	VAB
-	Long term tracheostomy where the child is cared for at home	Шшт
of me the	evere atopic dermatitis which involves at least 75% the body surface and which has required two or ore hospitalisations of at least 5 days duration in e previous calendar year, and/or the use of imunosuppressive therapy	ATD
ar sig	gnificant burn where more than 30% of body surface ea is affected, or a lesser burn where there is gnificant impairment of function of the hands or feet assistance is required with feeding or toileting to a eater degree than is age appropriate for the child	BUR
co ex	astroenterological condition or other medical andition requiring total parenteral nutrition for an attended period, with medical treatment and edical supervision required for at least 12 months	GAS
is wl	nal stage of Ulcerative Colitis where the condition no longer responding to medical treatment and here a sub-total colectomy and ileo-rectal lastomosis with formation of a J-pouch is required	ULC
re	olyarticular course Juvenile Arthritis requiring gular multi-disciplinary therapy, including nmunosuppressive medication	РЈА
		sted at

11 Please read this before answering the following questions.

Instructions for questions 12 —19

- Please indicate the statement that describes the child's usual ability.
- If the child cannot do any of the skills listed in a question, tick the last box.
- If the child's ability is appropriate for the age of the child, tick the first box.
- The child's abilities include what he/she can do when using his/her aids, appliances or special equipment items.
- Where the child's disability or medical condition is episodic or is only apparent at certain times, the question should be answered for what the child is currently able to do most of the time.

The child is considered to have the functional ability to do certain things if:

- he/she can do the task given the opportunity.
- he/she can do the task consistently or on a daily basis, e.g. the child cannot be said to 'manage his/her own toileting with minimal assistance' unless he/she can do so more or less every day.
- he/she can do the task to a reasonable standard,
 e.g. the child has the ability to 'crawl or otherwise propel himself/herself along' only if he/she can do so without difficulty.
- where the task is in two parts, the child must be able to do **both** parts,
 - e.g. 'child can read **and** interpret a paragraph from the front page of a daily newspaper'.

Receptive language skills: **Tick one box** only to indicate the child's best ability in this area. Child's ability is age appropriate. Child understands adult speech or signed language of normal speed and complexity. Child demonstrates full understanding of why they are interacting with a health professional. Child can read and interpret a paragraph from the front page of a daily newspaper. Child can read a paragraph or page from a children's story book appropriate for the child's age group. Child can recall a list of three common objects 30 seconds after the list is read to them. Child understands and responds appropriately to simple questions such as 'do you go to school?' and 'what is your favourite colour?' Child follows two step instructions such as 'pick up M-1f the book and put it on the chair'. Child uses toys appropriately for their intended purpose in meaningful play. Child knows the difference between 'big' and 'little'. Child can demonstrate what common objects are used for. Child recognises pictures of common objects (e.g. points appropriately when asked 'where's the dog?' or 'which one is the truck?"). Child responds appropriately to very simple questions M-1c (e.g. points to, or looks at, mother when asked 'where's mummy?'). Child uses objects purposefully (e.g. to make a sound). Child responds to sound. Child tracks noise-making objects.

Child looks momentarily at speaker's face.

Child cannot do any of the things listed above.

13 Expressive language skills:

Child's ability is age appropriate.		M-2I
Child has almost a full adult vocabulary. Child can discuss and debate complex issues such as politics or religion with an adult.		M-2j
Child can describe his/her experiences in detail using complex sentences.		M–2i
Child can tell a complex story involving several characters. Child can write a short story.		M-2h
Child can write their own first name by handwriting or typing. Child can state their name and home address.		M–2g
Child talks or signs well and can use six or more words in a sentence. Child can describe an event (e.g. a visit to a special place).	;	M-2f
Child can say sentences with three to four words. People other than family members can understand the child's speech.		M-2e
Child can clearly say or sign more than 20 words and can use two words in combination (e.g. 'Daddy's car').		M-2d
Child can say or sign three or more simple words (e.g. 'mum', 'dad', 'drink', 'bed').		M-2c
Child smiles and babbles or makes purposeful sounds (e.g. to attract attention). Child demonstrates good eye contact.		M-2b
Child makes a vocal sound other than crying.		M–2a
Child cannot do any of the things listed above.		M–2k

Tick one box only to indicate the child's best ability in this area.

M-1k

Feeding and mealtime skills: **Tick one box** only to indicate the child's best ability in this area. Child's ability is age appropriate. _ M−3I Child can use all cooking equipment and kitchen M-3j appliances (e.g. microwave oven, electric frypan, or mixer) without assistance. Child can follow a recipe and prepare a simple meal. . M−3i Child can cook a simple snack (e.g. toast). M-3h Child can prepare a simple uncooked snack _ M−3q (e.g. a sandwich). Child can use a fork and spoon at mealtimes. Child can eat most solid foods if food is cut up M-3e (e.g. raw apple). Child uses spoon well. _ M–3d Child can drink from a normal cup without help and can feed himself/herself with finger foods. Child can drink from a modified cup when the cup is held by an adult. Child can suck from a breast or baby's feeding bottle.

Child cannot do any of the things listed above.

5	Hygiene and grooming skills:		
	Tick one box only to indicate the child's best ability in t	his a	area.
	Child's ability is age appropriate.		M–4k
	Child can style own hair and clean and cut own finger and toe nails without assistance.		M-4i
	Child can attend to basic hygiene (e.g. toileting, showering and brushing hair) without assistance.		M-4h
	Child manages basic hygiene (e.g. toileting, showering and brushing hair) with little assistance.		M–4g
	Child can wash hands and face and brush own teeth.		M-4f
	Child is reliably toilet-trained during the day and can manage own toileting with minimal assistance.		M-4e
	Child can indicate toilet needs during the day but needs some assistance with clothing and wiping.		M-4d
	Child is toilet-timed during the day or is indicating toilet needs (e.g. asking for the toilet or potty—even if it's too late, or telling parent that pants or nappy are wet).		M-4c
	Child requires full assistance with toileting.		M-4b
	Child cries when nappy is soiled or wet.		M-4a
	Child cannot do any of the things listed above.		M-4j
6	Dressing skills: Tick one box only to indicate the child's best ability in t	his a	area.
	Child's ability is age appropriate.		M-51
	Child can purchase and care for own clothing without assistance.		M-5j
	Child can wash and iron own clothing if required to with little assistance.		M-5i
	Child can choose own clothing appropriate to the weather and can dress and undress without any assistance.		M-5h
	Child can do up buckles and untie shoelaces.		M-5g
	Child can do up buttons and zippers.		M-5f
	Child dresses and undresses himself/herself but needs assistance with buttons, laces or tight clothing.		M-5e
	Child can undress with little assistance.		M-5d
	Child tries to help with dressing.		M Fo

Child lifts arms to be picked up.

Child snuggles in to an adult when cuddled.

Child cannot do any of the things listed above.

M-5b

1

J М–3а

_ M–3k

Social and community skills: **Tick one box** only to indicate the child's best ability in this area. Child's ability is age appropriate. Child can use all major community facilities (e.g. shops, banks, doctors) with little assistance. Child has basic understanding of community laws and regulations. Child is able to undertake basic activities in the M-6i community (e.g. shopping) with little supervision. Child understands basic personal safety (e.g. how to cross the road and not to go with strangers). Child relates well to both children and adults. Child is aware of being left in the care of others M-6a (e.g. school teacher or child care worker) without getting unduly upset. Child understands basic concepts of right and wrong. Child plays with other children and forms close M-6f friendships with other children. Child joins in simple games such as 'chasey' and 'hide and seek' but may not understand or follow rules of a game. Child takes turns in conversations (e.g. speaks and then M-6e listens). Child knows whether they are a boy or girl. Child initiates contact with other people and involves M-6d other people in games or activities. Child is starting to cooperate in play with other children. Child responds to affection from familiar people. Child M-60 recognises the difference between strangers and familiar people. Child laughs and giggles when happy and cries when M-6b upset or angry. Child is interested in people and enjoys attention.

Child smiles. Child settles when picked up and cuddled.

Child cannot do any of the things listed above.

18 Mobility— fine motor skills:

,	
Child's ability is age appropriate.	M-7I
Child can use a variety of tools or hobby items with accuracy (e.g. for woodwork, sewing, painting or model building).] _{M-7j}
Child can write clearly.	M-7i
Child can write all letters of the alphabet clearly.	M-7h
Child can hold a pencil and draw basic shapes such as squares and triangles. Child can clearly write their own first name.	M-7g
Child can manipulate smaller objects accurately (e.g. jigsaw puzzle pieces). Child can draw at least a head and a body on a person stick figure style.	M-7f
Child can build a tower of nine blocks. Child can copy a circle and a cross.	M-7e
Child can manipulate larger objects and toys (e.g. can push or pull toys, use posting box toys or build small tower of blocks). Child can copy a straight vertical line.	M-7d
Child can make purposeful movements with objects (e.g. bang on a drum or clap hands).	M-7c
Child grasps and releases objects such as a rattle or feeding bottle.	M-7b
Child can grasp an adult finger but may need assistance to release it.	M-7a
Child cannot do any of the things listed above.	M-7k

Tick one box only to indicate the child's best ability in this area.

M-6k

Mobility—gross motor skills: **Tick one box** only to indicate the child's best ability in this area. Child's ability is age appropriate. M-8k Child can hit a ball with a bat and can kick a ball with M-8i reasonable accuracy. Child can catch a small ball (e.g. a tennis ball). Child M_{-8h} skips well or rides a two-wheel bike. Child can jump and can hop on each leg. Child can bounce a ball and catch it. Child can run fast. Child can balance on one leg for three seconds. Child can hop on one leg. Child can balance briefly while standing on one leg. Child can pedal a tricycle. Child can walk and can run a few steps. Child can walk up and down steps. Child has even muscle tone and strength in all limbs. M_8c Child can pull himself/herself from floor to a standing position and may be able to stand independently. Child can independently move between prone and M-8b supine positions. Child can crawl or otherwise propel himself/herself along.

Child can lift head when in prone position. Child makes

random movements with arms and legs.

Child cannot do any of the things listed above.

Behaviour and special care needs

Instructions for questions 20 and 21

- For questions 20 and 21, please indicate ALL statements that describe the child's behaviours or special care needs.
- The response should be based on the child's behaviour when he/she is receiving prescribed medication.

20 Behaviour:

Tick the boxes that apply.

None of the above apply.

Эа
9b
Эс
∂d
Эе
∂f

_ M–8i

21	Special care needs:		22	Please read this before answering the following questions.
	Tick the boxes that apply.			For the following guestions navoual care masses engaing care
	Child receives all food and fluids by nasogastric, gastrostomy tube or percutaneous entero gastric tube (PEG).	M–10a		For the following questions personal care means ongoing care required for a significant period every day (at least the equivalent of a working day) because of a child's disability or medical condition, to maintain comfort, sustain life, or attend to a bodily function that the child cannot manage his or herself.
	Child has a tracheostomy.	M-10b		to a bodily furication triat the crime curried managerine of forecon.
	Child requires a ventilator to support respiration.			
	Child requires regular oxygen therapy at home.		23	Does the child have a condition that may significantly reduce their life expectancy?
	Child requires a CPAP or BiPAP machine.			
	Child is aged over four years and is incontinent both day and night.			No Go to 28 Yes Go to next question
	Child is aged over three years and cannot stand without support.		24	Is the average life expectancy of a child with this or a similar condition substantially longer than 24 months?
	Child requires a wheelchair and requires assistance to] _{M-10e}		No Go to next question
	propel the wheelchair.			Yes Go to 28
	Child requires a wheelchair, quad sticks, prosthesis, crutches or walking frame but can move around with little assistance using this equipment.	M-10f	25	Does the child need personal care for a significant period
	Child uses an electric wheelchair.	M-10g		everyday for the duration of the condition?
	Child requires urinary catheterisation several times	M-10h		No Go to 33
	each day.	J IVI—TUTI		Yes Go to next question
	Child requires specialised equipment, prosthesis or technology to communicate (e.g. computerised communicator, telephone typewriter (TTY), voice synthesiser, cochlear implant, hearing aids or adaptations to a standard computer).	M–10i		Not sure Give details below Comments
	Child is aged over five years and has persistent difficulties with memory, concentration, planning and organisation.	M-10j		
		M–10k	26	Is the care load associated with the child so high that more that one carer is required to provide this amount of daily care (e.g. the amount of personal care required by the child each day is equivalent to more than one working day, or continuous care is required day and night, or frequent care tasks such as lifting the child require more than one person to perform the task)?
	Child is receiving a course of chemotherapy or radiotherapy treatment for cancer.	M-10I		In certain circumstances, two or more carers may qualify for Carer Payment for care provided to the same child or children.
	The child has poorly controlled seizures which frequently require emergency medication or first aid.	M-10m		No Go to 33
	Child is assisted on a daily basis with at least two blood tests to measure blood glucose levels, injections and special dietary management and the child is not capable of determining medication levels, food intake or self administration of medication.	M–10n	27	How many carers are required to provide this care? Go to 33
	Child has a severe eating disorder such as anorexia nervosa or bulimia.			
	None of the above apply.			

	No Go to 34 For 6 months or more Go to 29 Not sure Give details below	No	Please provide the details of the legally qualified medical practitioner who can certify the diagnosis indicated at question 1. Name
			Professional qualifications
	Go to 34		Address
29	What is the estimated start date and end date for the period that the child will need this care?		
	From To		Postcode
			Contact phone number
20			()
30	Is the child likely to have future episodes of the same or a similar condition?		► Go to next question
	No Yes	Yes	Go to next question
31	Is the care load associated with the child so high that more than one carer is required to provide this amount of daily care (e.g. the amount of personal care required by the child each day is equivalent to more than one working day, or continuous care is required day and night, or frequent care tasks such as lifting the child require more than one person to perform the task)? In certain circumstances, two or more carers may qualify for Carer Payment for care provided to the same child or children. No Go to 34 Yes Go to next question	34 Are the	ere any other comments you wish to make?
32	How many carers are required to provide this care?		
	Go to 34		
	· · · · · · · · · · · · · · · · · · ·		

28 Does the child need personal care because of a severe disability 33 Are you a legally qualified medical practitioner?

SA431.1109

Release of medical information about the child requiring care Details of Medical Practitioner or treating health professional completing this report The Freedom of Information Act 1982 allows for the disclosure Please print in BLOCK LETTERS or use stamp. of medical or psychiatric information about the child requiring care in certain circumstances. If there is any information about Name the child in your report which, if released, may harm their physical or mental well-being, please identify it and briefly state below why it should not be released. Similarly, please specify any other special circumstances which should be taken Professional qualifications into account when deciding on the release of your report. Is there any information in this report which, if released, might harm the child's physical or mental well-being? Go to next question Address Identify the information and state why it should not be Postcode Contact phone number Medicare Provider Number (if applicable) Name of health or disability service employer (if applicable) Signature Date / Stamp (if applicable) Please return this report directly to Centrelink after completing your details at question 37. 36 **Returning this report** Confidentiality of information The personal information that is provided to you for the purpose of this report must be kept confidential under section 202 of the Social Security (Administration) Act 1999. It cannot be disclosed to anyone else unless authorised by law. There are penalties for offences

You can give this report and any attachments to the carer or you can return this report directly to Centrelink. However, if you answered 'Yes' at question 35, please make sure to return this report directly to Centrelink.

Act 1999.

against section 202 of the Social Security (Administration)