Worksheet 3: Physician Medical Information Worksheet

FOR PHYSICIAN USE

The purpose of this worksheet is to assist you in supporting your patient’s Social Security Disability Insurance application, in compiling medical records, and in writing the Medical Source Statement (MSS). Below are possible medical tests you might give your patient to support their claim. All tests might not be necessary. Please consult with your patient regarding insurance coverage before conducting tests.

Complete these worksheets using patient medical records and case notes. You might need to hold a clinical consultation to assess interactive symptoms such as fatigue and physical limitations.

Attach copies of these worksheets and the MSS to the package of medical records and other documents you will send to the state Disability Determination Services (DDS). Keep copies of this in patient records and share the complete copy of this package of information with the patient.

SSA Criteria: Disorganization of Motor Function

Documentation Included in Record:

☐ EDSS Test date: _________
  Physician Comments: ____________________________________________

☐ MRI ( ) with contrast ( ) without contrast Test date: _________
  Physician Comments: ____________________________________________

☐ CT Scan Test date: _________
  Physician Comments: ____________________________________________

☐ Other laboratory testing: _________________________________________

SSA Criteria: Visual

Documentation Included in Record:

☐ Vision Test Test date: _________
  Physician Comments: ____________________________________________

☐ Acuity, Visual Fields, Visual Evoked Potentials, Nystagmus, etc. Tests
  Physician Comments: ____________________________________________

☐ Other Vision Testing: ____________________________________________

SSA Criteria: Mental Impairments

Documentation Included in Record:
Neuropsychological Tests
Test date: ______
Physician Comments:

Memory Test
Test date: ______
Physician Comments:

DSM-IV Diagnosis
Test date: ______
Physician Comments:

Depression or Anxiety Tests or Scales: ______________________________

Other Cognitive Tests: ___________________________________________

Mental: ________________________________________________________

SSA Criteria: Fatigue of Motor Function

Modified Fatigue Impact Scale
Test date: ______
Physician Comments:

Fatigue Questionnaire
Test date: ______
Physician Comments:

Sleep Questionnaire
Test date: ______
Physician Comments:

Other Exercise Protocols to Measure Motor Fatigue (e.g. work simulation):

Complete Blood Count
Test date: ______
Physician Comments:

Hematocrit
Test date: ______
Physician Comments:

Thyroid Function
Test date: ______
Physician Comments:

Liver Function
Test date: ______
Physician Comments:

Other Laboratory Testing: ________________________________________

Use this worksheet in conjunction with the SSA MS Listings Criteria below. Use the following space for additional comments and clarification.
Official SSA MS Listings Criteria  *(worksheet 3 continued)*
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**Disorganization of Motor Function:**
11.04B Motor function in extremities that impairs movement: Significant and persistent disorganization of motor function in two extremities, resulting in sustained disturbance of gross and dexterous movements, or gait and station (see 11.00C).

11.00C Basis for decision of neurological impairment: Persistent disorganization of motor function in the form of paresis or paralysis, tremor or other involuntary movements, ataxia and sensory disturbances (any or all of which could be due to cerebral, cerebellar, brain stem, spinal cord, or peripheral nerve dysfunction) which occur singly or in various combinations, frequently provides the sole or partial basis for decision in cases of neurological impairment. The assessment of impairment depends on the degree of interference with locomotion and/or interference with the use of fingers, hands and arms.

**Visual Impairment:**
2.02 Impairment of Visual Acuity. Remaining vision in the better eye after best correction is 20/200 or less.

**Mental Impairment:**
12.02 Organic Mental Disorders: Psychological or behavioral abnormalities associated with a dysfunction of the brain. History and physical examination or laboratory tests demonstrate the presence of a specific organic factor judged to be etiologically related to the abnormal mental state and loss of previously acquired functional abilities. The required level of severity for these disorders is met when both A and B are satisfied, or when C is satisfied.

A. Demonstration of a loss of specific cognitive abilities or affective changes and the medically documented persistence of at least one of the following:

1. Disorientation to time and place; or 2. Memory impairment, either short-term (inability to learn new information), intermediate, or long-term (inability to remember information that was known sometime in the past); or 3. Perceptual or thinking disturbances (e.g., hallucinations, delusions); or 4. Change in personality; or 5. Disturbance in mood; or 6. Emotional ability (e.g., explosive temper outbursts, sudden crying, etc.) and impairment in impulse control; or 7. Loss of measured intellectual ability of at least 15 I.Q. points from premorbid levels or overall impairment index clearly within the severely impaired range on neuropsychological testing, e.g., Luria-Nebraska, Halstead-Reitan, etc; AND

B. Resulting in at least two of the following:
1. Marked restriction of activities of daily living; or 2. Marked difficulties in maintaining social functioning; or 3. Marked difficulties in maintaining concentration, persistence, or pace; or 4. Repeated episodes of decompensation, each of extended duration; OR

C. Medically documented history of a chronic organic mental disorder of at least 2 years' duration that has caused more than a minimal limitation of ability to do basic work activities, with symptoms or signs currently attenuated by medication or psychosocial support, and one below:

1. Repeated episodes of decompensation, each of extended duration; or 2. A residual disease process that has resulted in such marginal adjustment that even a minimal increase in mental demands or change in the environment would be predicted to cause the individual to decompensate; or 3. Current history of 1 or more years' inability to function outside a highly supportive living arrangement, with an indication of continued need for such an arrangement.

Fatigue:
11.09C Fatigue. Significant, reproducible fatigue of motor function with substantial muscle weakness on repetitive activity, demonstrated on physical examination, resulting from neurological dysfunction in areas of the central nervous system known to be pathologically involved by the multiple sclerosis process.