# **Confidential medical report**

Access arrangements and reasonable adjustments (AARA)

The QCAA requires a medical report for medical claims for AARA or illness and misadventure. Medical reports may only be completed by the student's general practitioner (GP), medical specialist, or psychologist (registered under Queensland's *Health Practitioner Regulation National Law Act 2009*). The health professional providing a report must not be related to the student or employed by the school. The information provided needs to be current and relate to the relevant assessment period.

Information provided in this report is treated in strictest confidence and is used only for the purpose of determining the AARA application.

If the health professional does not use this report form, they must supply a current medical report containing all of the following information.

Student details								
Student name								
LUI								
School								
FOR If you are unsure, see About this report, on the last page.	<ul> <li>AARA (for existing and chronic conditions)</li> <li>Health professionals complete:</li> <li>Part A</li> <li>Part B — AARA</li> <li>Health professional details.</li> </ul>	<ul> <li>Illness and misadventure (for unforeseen circumstances)</li> <li>Health professionals complete:</li> <li>Part A</li> <li>Part C — Illness and misadventure</li> <li>Health professional details.</li> </ul>						
I give permission for my health professional to provide information concerning this application to the QCAA, if required.								
Student signature:			Date: / /					
Parent/carer signature: (if student is under 18)			Date: / /					

This page is to be completed by the student and their parent/carer

The school will submit this completed report as part of an AARA application via the QCAA Portal.

When completed, QCAA classification = SENSITIVE (PERSONAL INFORMATION)

The information you provide on this form is being collected and used in relation to the functions and powers prescribed under Part 2 of the *Education (Queensland Curriculum and Assessment Authority) Act 2014.* The information will be accessed by QCAA staff and handled in accordance with the *Information Privacy Act 2009.* Information held by the QCAA is subject to the *Right to Information Act 2009.* 





### Part A

This section is to be completed only by the health professional (all applications)

Student name								
Diagnosis								
Date of diagnosis	1 1							
Date of occurrence/onset	1 1							
Provide a brief hist symptoms	Provide a brief history of the student's disability, impairment and/or medical condition, including symptoms							

Is the student currently receiving treatment? Please indicate

Comment on the probable effect of this disability, impairment and/or medical condition on this student's capacity to complete timed assessment

## Part B — AARA

This section is to be completed *only* by the health professional (applications relevant to existing and chronic conditions)

Comment on how the disability, impairment and/or medical condition would affect this student's daily functioning in the classroom

Professional recommendations for assessment adjustments

### Part C — Illness and misadventure

This section is to be completed *only* by the health professional (in the case of an unexpected illness or event).

I consider that the effect of the impairment arising from the medical condition is/was:											
in mild in more			moderate				[	severe			
I consider that the student is/was:											
	disadvantaged due to a temporary medical condition										
	unfit to participate in assessment due to a temporary medical condition										
	from	/	/	to	/	1					
	unfit to	participa	te in ass	sessment	t due to a	a deteri	oration	in a chro	nic conc	lition	
	from	1	/	to	/	1					
	affected									unt of time	

### Health professional details

Name					
Profession					
Phone					
<b>Specialty/qualifications</b> (if applicable)					
Place of work					
Registration number					
<b>Practice stamp</b> (if applicable)					
Signature:	1		Date:	1	1

**Electronic signature:** If this document is completed electronically, by completing the fields above and inserting the signatory's name, the signatory agrees that this becomes a signed document pursuant to section 14 of the *Electronic Transactions (Queensland) Act 2001.* 

#### About this report

#### Access arrangements and reasonable adjustments (AARA)

Some students may have disability, impairment and/or medical conditions, or experience other circumstances that may be a barrier to their performance in assessment. Access arrangements and reasonable adjustments (AARA) are designed to assist these students. For more information, visit www.qcaa.qld.edu.au/senior/assessment/aara.

#### **Illness and misadventure**

Students may also experience unforeseen circumstances that may be a barrier to their performance in assessment, such as a significant deterioration of an existing medical condition, or experiencing a natural disaster, accident or significant cultural obligation. These students may be eligible for illness and misadventure adjustments.

#### Submitting this report

The medical professional should return this form to their patient. The school will submit the report as part of an AARA application via the QCAA Portal.