Worksheet: Disability Allowance medical report (DAMed1)

Date

Ref

Patient	Date of birth	MRN
Address		

Medical report, completed by the doctor

Hospital admissions

Relevant investigations

Clinical findings

DSP panel number, for the fee

Attending a specialist, on medication, other treatment

Pregnancy and expected date of delivery, where relevant

Enclosures the form asks for

Test results and other relevant information

Reports from consultants, psychiatrists, psychologists, physiotherapists and counsellors