# Confidential medical report

Access arrangements and reasonable adjustments (AARA)

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 only used for the purpose of determining the student's 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.

For more information, refer to **About this report** on the last page.

| Student details  |  |       |   |   |  |  |
|--|--|-------|---|---|--|--|
| Student name:  |  |       |   |   |  |  |
| School:  |  |       |   |   |  |  |
| LUI:   |  |       |   |   |  |  |
| I give permission for my health professional to provide information concerning this application to the QCAA, if required.  |  |       |   |   |  |  |
| Student signature:   |  | Date: | 1 | 1 |  |  |
| Parent/carer signature: (if student is under 18)   |  | Date: | 1 | I |  |  |
| Are you applying for:  |  |       |   |   |  |  |
| ☐ Access arrangements and reasonable adjustments (for existing and chronic conditions)   |  |       |   |   |  |  |
| Health professionals complete <b>Part A</b> and <b>Part B</b> — <b>AARA</b> , and complete and sign the <b>Health professional details</b> .                     |  |       |   |   |  |  |
| Illness and misadventure (for unforeseen circumstances)  |  |       |   |   |  |  |
| Health professionals complete <b>Part A</b> and <b>Part C</b> — <b>Illness and misadventure</b> , and complete and sign the <b>Health professional details</b> . |  |       |   |   |  |  |
| If you are unsure which to apply for, refer to <b>About this report</b> on the last page.  |  |       |   |   |  |  |
| Submit this completed report as part of an AARA application via the QCAA Portal.   |  |       |   |   |  |  |

The information you provide on this form will be used for access arrangements and reasonable adjustments (AARA), which are designed to assist students with disability, impairment, medical conditions or other circumstances that may be a barrier to their performance in assessment. These procedures for these arrangements and adjustments are set out in the QCE and QCIA policy and procedures handbook 2019 v 1.0. Personal information will be accessed by authorised 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 **only** to be completed by the health professional.

| Diagnosis:  |  |  |  |  |  |
|---|--|--|--|--|--|
| Date of diagnosis:  | 1 1  |  |  |  |  |
| Date of occurrence/onset:   | 1 1  |  |  |  |  |
| Provide a brief history of the student's disability, impairment and/or medical condition, including symptoms. |  |  |  |  |  |
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| Is the student currer   | ntly receiving treatment? Please indicate. |  |  |  |  |
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| Comment on the probable effect of this disability, impairment and/or medical condition on this student's capacity to complete timed assessment. |  |  |  |  |
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## Part B — AARA

This section is **only** to be completed by the health professional.

| Comment on how the disability, impairment and/or medical condition would affect this student's daily functioning in the classroom. |  |  |  |  |
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| Professional recommendations for assessment adjustments.   |  |  |  |  |
| Professional recommendations for assessment adjustments.   |  |  |  |  |
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## Part C — Illness and misadventure

This section is **only** to be completed by the health professional.

| I consider that the effect of the impairment arising from the medical condition is/was:   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| ☐ mild ☐ 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 / / .   |  |  |  |  |  |  |
| unfit to participate in assessment due to a deterioration in a chronic condition from / / to / / .  |  |  |  |  |  |  |
| If the student was affected for less than a full day, comment on the amount of time the student was affected during a timed assessment, e.g. second half of the exam session. |  |  |  |  |  |  |
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# **Health professional details**

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

## 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.

#### 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 QCAA requires a medical report for medical claims for AARA or illness and misadventure. Once complete, submit this report as part of an AARA application via the QCAA Portal.