


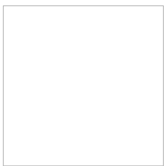
Daman Form Combined

Patient Name	:	Zeref Dragneel	Emirates ID	:	784-5969-9872125-7
File No	:	18	DOB	:	1996-06-20
Nationality	:	Japanese			
Gender	:	Male	Doctor's Name	:	Doctor Vision
Date	:	2024-02-19			

Coverage and medical indications of Speech Therapy				
- Speech Therapy Evaluation Form -				
Date of Assessment:	2/3/2024 12:00:00 AM			
Insurance number:	INS-SUK-1233124GH54			
Presenting symptoms:	sss			
Diagnosis:	rthropathy following intestinal bypass, right hip			
Ordering physician:	sss			
Speech language pathologist/therapist:	ss			
Evaluation				
Has a speech therapy evaluation been done?	<input type="radio"/> Yes	<input type="radio"/> No	If yes kindly attach results:	ss
Date of onset or exacerbation of disorder:	2/10/2024 12:00:00 AM			
What are the treatment techniques you want to use?	ss			
What are the goals of treatment?	sss			
Kindly state a reasonable estimate of the time duration of when the goals will be met:	1/1/1900 12:30:00 AM			
Re- Evaluation				
Is the patient improving on current therapy?	<input type="radio"/> Yes	<input type="radio"/> No	If no, why?	ss
Are the previous goals being met?	ss			
Has the reason able expected time for improvement been exceeded without any improvement?	1/1/1900 12:00:00 AM	If reasonable expected time for improvement has exceeded kindly justify.		ss
Has the patient reached a plateau phase?	ss			

Assessment			
1. Oral Motor Examination:		ss	
2. Receptive Evaluation:		sssss	
3. Expressive Evaluation:		ssss	
4. Pragmatic Assessment:		ssss	
5. Articulation Assessment:		ssss	
6. Voice Assessment:		ss	
7. Swallowing Evaluation:		s	
8. Cognitive Evaluation		ss	
Short term goals		Time frame:	ss months
1.	ss		
2.	s		
3.	ss		
4.	ss		
5.	s		
6.	ss		
7.	s		
8.	s		
Long term goals		Time frame:	ss months
1.	s		
2.	s		
3.	s		
4.	s		
5.	s		
6.	s		
7.	s		
8.	s		
GRAPHICAL REPRESENTATION OF PATIENT'S PROGRESS			

G1:	s		
G2:	s		
G3:	s		
G4:	s		
G5:	s		
G6:	s		
G7:	ss		
G8:	s		
G9:	s		
Name: Zeref Dragneel		Sound:s	Level:s
Note: this is sample, different graphs can be plotted, as long they show clearly the patient progress and makes progress tracking easy.			
Physician information			
s			
s			
s			

Sign here, only if all of your questions have been answered to your satisfaction	
PATIENT	DOCTOR
	
Patient Name Zeref Dragneel Date 2024-02-19 (10:45 - 11:00)	Doctor Name Doctor Vision - Speech Therapy (DHA101) Date 2024-02-19 (10:45 - 11:00)

