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Note to student: Please do not complete this form --it must be completed by your treating



Diagnostic Information

Please list the diagnosis/es and the related DSM-5 or ICD-10 codes:

D510Tj573 .4 () () (7005C7-0.022 Tw20487Slist)Tj 0.0104900030041400480003>/TT4S844048000

\$FDGHPLF \$FFRPPRGDWLRQ ,QIRUPDWLRQ

\$ GLDJQRVLV GRHV QRW LQ DQG RI LWVHOI TXDOLI\ D VWXGHQW I
'LVDELOLWLHV \$FW \$PHQGPHQWV \$FW '\$\$\$ \$FFRPPRGDWLRQV DU
\$FFRPPRGDWL WK vs 5RGDWLTXH WK "r \$FFRPPRGDWL WK vr 5RGDWL

Major Life Activity	None	Mild	Moderate	Severe	3 OHDVH LQFOXGH DQ H[SODQD WLRQ RI (PRGHUDWH RU VHYHUH LPSDFW LV LQGL ,QFOXGH OLPLWDWLRQV UHODWHG WR P
6 OHHSLQJ					
(DWLQJ					
,PPXQH 6\ VWHP)XQFWLRQV					
6HOI FDUH					
6SHDNLQJ					
%ODGGHU 'LJHVWLYH					