Medical Summary Report Template

Use your own agency letterhead and delete the guidance underneath

each heading when submitting to DDS

[Insert DDS Address/Examiner if known]

**NAME:**

**SSN:**

**DOB:**

Dear \_\_\_\_\_\_\_\_\_:

**INTRODUCTION**

*(The applicant’s physical description, including their behavior, mannerisms, and dress; all the applicant’s physical and mental health diagnoses; assessment of the applicant’s functioning or appearance)*

**PERSONAL HISTORY**

*(Including abuse/trauma history, educational history, and legal history only as they relate to the applicant’s current symptoms and functioning)*

**OCCUPATIONAL HISTORY**

*(Employment and military history for the past 15 years; include all jobs, reasons for leaving, job skills, problems with task completion and relationships with supervisors and co-workers; describe how this relates to the applicant’s current symptoms and functioning)*

**SUBSTANCE USE**

*(Substance use history and treatment, including reasons for use, impact of use, treatment history, and any periods of sobriety; describe the applicant’s symptoms while sober)*

**PHYSICAL HEALTH HISTORY**

*(Brief summary of the applicant’s symptoms and treatment for physical health conditions at all providers including context for treatment, diagnoses, medications, and side effects)*

**PSYCHIATRIC HISTORY**

*(Brief summary of the applicant’s symptoms and treatment for mental health conditions at all providers including context for treatment, diagnoses, and medications and side effects)*

**FUNCTIONAL INFORMATION**

*(Address all four areas of functioning using detailed examples and quotes to describe how the applicant’s symptoms impact his/her current ability to function)*

*Understand, Remember, or Apply Information*

*Interact with Others*

*Concentrate, Persist, or Maintain Pace*

*Adapt or Manage Oneself*

**SUMMARY**

*(Brief summary of the evidence provided, restating diagnoses provided in the introduction)*

If you have any questions, please call \_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_, or Dr. \_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_.

Sincerely,

[Insert signatures]