HUMAN IMMUNODEFICIENCY VIRUS (HIV) INFECTION MEDICAL ASSESSMENT FORM

TO:					
RE:					
SSN	l:				
imp	ase answer the following questions airments. Attach all relevant treatment no ial Security.	concerr otes and	ning yo I test re	our patient's HI sults not previou	V and other sly provided to
1.	Nature, frequency and length of cont	tact:			
2.	Please indicate results of HIV labora Negative	itory tes	t(s):	Pos	sitive
	If positive, date test results first foun	d to be	positive	:	
3.	Please indicate most recent: CI (date) or percent (%) if count not a			ocyte count	as of
4.	Other diagnoses including emotiona	l proble	ms:		
5.	Opportunistic and Indicator Disease	s:			
	BACTERIAL INFECTIONS	3.		,	1
1.	[] MYCOBACTERIAL INFECTION (e.g. caused by M. avium-] OCARDIOSIS	N
	intracellulare, M. kansasii, or M. tuberculosis), at a site other than the lungs, skin, or cervical or hilar	4.	[]	SALMONELLA recurrent non-type	BACTEREMIA, phoid
2.	lymph nodes [] PULMONARY TUBERCULOSIS, resistant to treatment	5.	[]	(e.g. meningov	EUROSYPHILIS, /ascular syphilis urologic or other

6.	[]	MULTIPLE OR RECURRENT BACTERIAL INFECTION(S), including pelvic inflammatory	9.	[]	tract, or oral or vulvovaginal mucous membranes; or candidiasis involving the esophagus, trachea, bronchi, or lungs COCCIDIOIDOMYCOSIS, at a site
		disease, requiring hospitalization or intravenous antibiotic treatment 3 or more times in 1 year.			other than the lungs or lymph nodes
<u>FUNG</u>	AL INFE	<u>CTIONS</u>			
7.	[]	ASPERGILLOSIS			
8. 10.	[]	CANDIDIASIS at a site other than the skin, urinary tract, intestinal			
, .		CRYPTO COCCOSIS, at a site other than the lungs (e.g. cryptococcal	<u>VIRAL</u>	INFECT	<u>TIONS</u>
11.	[]	meningitis) HISTOPLASMOSIS, at a site	17.	[]	CYTOMEGALOVIRUS DISEASE, at a site other than the liver, spleen or lymph nodes
		other than the lungs or lymph nodes	18.	[]	HERPES SIMPLEX VIRUS
12.			[]MUC	CORMY	causing mucocutaneous infection CesiSoral, genital, perianal) lasting for 1 month or longer; or infection
PROT	OZOAN	OR HELMINTHIC INFECTIONS			at a site other than the skin or mucous membranes (e.g. bronchitis, pneumonitis,
13.	[]	CRYPTOSPORIDIOSIS, ISOSPORIASIS, OR MICROSPORIDIOSIS, with			esophagitis, or encephalitis); or disseminated infection
		diarrhea lasting for 1 month or longer	19.	[]	HERPES ZOSTER, disseminated or with multidermatomal eruptions that are resistant to treatment
14.	[]	PNEUMOCYSTIS CARINII PNEUMONIA OR EXTRAPULMONARY PNEUMOCYSTIS CARINII	20.	[]	PROGRESSIVE MULTIFOCAL LEUKOENCEPHALOPATHY
		PNEUMOCYSTIS CARINII INFECTION	21.	[]	HEPATITIS, resulting in chronic liver disease manifested by
15.	[]	STRONGYLOIDIASIS, extra intestinal			appropriate findings (e.g. persistent ascites, bleeding esophageal varices, hepatic
16.	[]	TOXOPLASMOSIS of an organ other than the liver, spleen, or			encephalopathy)
		lymph nodes	MALIC	<u>TNANT N</u>	NEOPLASMS
			22.	[]	CARCINOMA OF THE CERVIX, invasive, FIGO stage II and beyond

23. [] KAPOSI'S SARCOMA. with **SKIN OR MUCOUS MEMBRANES** extensive oral lesions: ОГ involvement of the gastrointestinal tract, lungs, or 26. CONDITIONS OF THE SKIN OR other visceral organs; or MUCOUS MEMBRANES, with involvement of the skin extensive fungating or ulcerating mucous membranes with lesions not responding to extensive fungating or ulcerating treatment (e.g. dermatological lesions not responding conditions such as eczema or treatment. psoriasis, vulvovaginal or other mucosal candida, condyloma 24. [] LYMPHOMA of any type (e.g. caused by human papillomavirus, primary lymphoma of the brain, genital ulcerative disease) Burkitt's lymphoma, immunoblastic sarcoma, other **HEMATOLOGIC ABNORMALITIES** non-Hodgkins lymphoma, Hodgkin's disease) 27. [] ANEMIA (hematocrit persisting at 25. SQUAMOUS CELL CARCINOMA [] 30 percent or less), requiring one OF THE ANUS or more blood transfusions on an average of at least once every 2 months 28. F 1 GRANULOCYTOPENIA. with absolute neutrophil counts below 1.000 repeatedly cells/mm³, with at least one spontaneous hemorrhage, requiring transfusion in the last 5 months; or intracranial bleeding in the last 12 months **HIV WASTING SYNDROME NEUROLOGICAL ABNORMALITIES** 30. [] ENCEPHALOPATHY, 32. [] HIV WASTING SYNDROME. charac-terized by cognitive or characterized by involuntary motor dysfunction that limits weight loss of 10 percent or more of baseline (or other significant function and progresses involuntary weight loss) and, in the absence of a concurrent OTHER NEUROLOGICAL MANI-31. illness that could explain the OF **FESTATIONS** INFECTION (e.g. findings, involvina: chronic peripheral diarrhea with 2 or more loose neuropathy), with significant an stools daily lasting for 1 month or persistent disorganization of longer: or chronic weakness and motor function in 2 extremities documented fever greater than resulting in sustained disturbance gross and dexterous 38cC (100.4cF) for the majority of

1 month or longer

movements, or gait and station

DIARKHEA				HALECTIONS KESISTAM TO TKENTALL OF					
			REQI	JIRING	HOSPITALIZATION OF				
			INTR	AVENO	US TREATMENT 3 OR MORE				
33.	[]	DIARRHEA, lasting for 1 month or longer, resistant to treatment,	TIME	S IN 1 Y	EAR				
		and requiring intravenous hydration, intravenous	36.	[]	SEPSIS				
		alimentation, or tube feeding	37.	[]	MENINGITIS				
CARDIOMYOPATHY				[]	PNEUMONIA (non-PCP)				
34.	[]	CARDIOMYOPATHY (chronic	39.	[]	SEPTIC ARTHRITIS				
υ τ.	ſ]	heart failure, or corpulmonale, or other severe cardiac abnormality not responsive to treatment)	40.	[]	ENDOCARDITIS				
NEPI	-IROPAT	<u>'НҮ</u>	41.	[]	SINUSITIS, radiographically documented				
35.	[]	NEPHROPATHY, resulting in chronic renal failure							

6. Other reported manifestations of HIV infections:

Identify any manifestations of HIV infection (including the 41 diseases mentioned on the preceding two pages but without the specified findings described above, or other manifestations such as hepatomegaly, oral hairy leukoplakia, etc.) resulting in significant signs or symptoms (e.g. fatigue, fever, weight loss, pain, night sweats).

Please specify:

DIADDIICA

- 1. the patient's manifestations;
- 2. the approximate number of episodes occurring in the same 1 year period; and
- 3. the approximate duration of each episode.

If you need more space, attach an extra page.

MANIFESTATIONS	NO. OF EPISODES IN THE SAME 1 YEAR PERIOD	APPROXIMATE DURATION OF EACH EPISODE

AND

b.	ANY OF THE FOLLOWING:
	 Marked* restrictions of ACTIVITIES OF DAILY LIVING; or Marked difficulties in maintaining SOCIAL FUNCTIONING; or Marked difficulties in completing tasks in a timely manner due to deficiencies in CONCENTRATION, PERSISTENCE, OR PACE.
	Social Security has provided the following examples of persons with HIV who exhibit "marked" limitations in the above three categories: activities of daily living: an individual with HIV infection who, because of symptoms such as pain imposed by the illness or its treatment, is not able to maintain a household or take public transportation on a sustained basis or without assistance (even though he or she is able to perform some self-care activities) would have marked limitation of activities of daily living. Social functioning: an individual with HIV infection who, because of symptoms or pattern of exacerbation and remission caused by the illness or its treatment, cannot engage in social interaction on a sustained basis (even though he or she is able to communicate with close friends or relatives) would have marked difficulty maintaining social functioning. Difficulties with concentration, persistence or pace: an individual with HIV infection who, because of HIV-related fatigue or other symptoms, is unable to sustain concentration or pace adequate to complete simple work-related tasks (even though he or she is able to do routine activities of daily living) would have marked difficulty completing tasks.
7.	Identify any side effects of any medications that may have implications for working: drowsiness/sedation other:
8.	If your patient experiences symptoms which interfere with the attention and concentration needed to perform even simple work tasks, during a typical workday, please estimate the frequency of interference: rarely occasionally frequently constantly
day;	s and other questions on this form, "rarely" means 1% to 5% of an eight-hour working occasionally" means 6% to 33% of an eight-hour working day; "frequently" means 34% of an eight-hour working day.
9.	If your patient was placed in a competitive job, identify those aspects of workplace stress that your patient would be unable to perform or be exposed to:
	public contact routine, repetitive tasks at consistent pace detailed or complicated tasks strict deadlines close interaction with coworkers/supervisors fast paced tasks (e.g., production line) exposure to work hazards (e.g., heights or moving machinery)

	.	other:									
10.	limitat ongoi	ions as ng basi	of your pati suming your s: y city blocks o	patient	was pla	iced in	a com	petitiv	e work	situatior	on an
	B.	Please time:	circle the hours	and/or mi	inutes tha	t your pa	atient car	contin	uously si	it and stai	nd at one
		1.	Sit:		15 20 30 4 nutes	<u> 15</u>	<u>-</u>		re than 2 urs	<u>}</u>	
			must your pa		ually do ^{own} .						
		2.	Stand:	<u>0 5 10 2</u> Minu	20 30 45 tes		1 2 More	than 2 Hou	rs		
		What wall	must your pa	atient us down	ually do other	after s	standin	g this	long?		
C.	Please breaks		how long your p	oatient car	n sit and s Sit	tand/wa Stand — — —	lk total in d/Walk	an eigh 	less tha about 2 about 4	n 2 hours hours	
D.			symptom(s) wo ht-hour workday		cause th	e need t	to take u	nsched	uled bre	aks to res	st during
		1)	How many tir	nes durin	g an aver	age wo	rkday do	you ex	pect this	to happe	n?
				<u>0 1</u>	23456	78910), more t	han 10			
		2)	How long (on Less t) will your 10 20 30 Minutes		have to i	est bef 12, mo	ore retur ore than : Hours	ning to wo <u>2</u>	ork?
E.	How m	nany pou	nds can the pat		nd carry lever	in a con Rarelv	npetitive Occas	work si	tuation? y Freq i	uently	
		Less the 10 lbs. 20 lbs. 50 lbs.		·					,		
11.	Please sustair limitati	ned basi:	e any other limit s or any testing	ations tha that would	at would a d help to	ffect you clarify th	ır patient ıe severit	's ability y of you	y to work ur patient	at a regula t's impairr	ar job on a nent(s) oi

12.	What is the earliest date the questionnaire applies?	at the description of symptoms and limitation	ons in this
Date	:	Signed:	
		Print Name:	
		Address:	

Re:	SSN:

To determine you patient's ability to do work-related activities on a day-to-day basis in a regular work setting, please give your opinion – based on your examination – of how your patient's mental/emotional capabilities are affected by the impairment(s). Consider the medical history, the chronicity of findings (or lack thereof), and the expected duration of any work-related limitations, but not your patient's age, sex or work experience.

- Seriously limited, but not precluded means ability to function in this area is seriously limited and less then satisfactory, but not precluded. This is a substantial loss of ability to perform the work-related activity.
- Unable to meet competitive standards means your patient cannot satisfactorily perform this activity independently, appropriately, effectively and on a sustained basis in a regular work setting.
- No useful ability to function, an extreme limitation, means your patient cannot perform this activity in a regular work setting.

MEN	TAL ABILITIES AND APTITUDE NEEDED TO WORK	Unlimited or Very Good	Limited but satisfactory	Seriously limited, but not precluded	Unable to meet competitive standards	No useful ability to function
1.	Interact appropriately with general public.					
2.	Understand, remember and carry out very short and simple instructions.					
3.	Maintain attention for even simple, repetitive tasks.					
4.	Work in coordination with or proximity to others without being unduly distracted or distracting of coworkers.					
5.	Complete a normal workday and workweek without interruption from psychologically based symptoms.	Taxaba Alaman				
6.	Perform routine repetitive work at a consistent pace without an unreasonable number and length of rest periods.					
7.	Accept instructions and respond appropriately to criticism from supervisors.					
8.	Be aware of normal hazards and take appropriate precautions.					

9.	Respond appropriately to changes in a routine work setting.			
10.	Deal with normal work stress of even routine, repetitive low stress jobs.			
11.	Deal with stress of semiskilled and skilled work.			

Date:	Signature: