Physician's Certification of Medical Condition

Child's Information (To be completed by the child's Parent/Legal Guardian)

Child's Name: Child's Date of Birth: Parent/Legal Guardian Name: _____

Parent/Legal Guardian Signature: _____

Parent/Legal Guardian: After your child's physician has completed this form, please attach it to your child's online application. You may do this by scanning a copy to your computer, or by taking a picture of each side of the form and attaching them.

Child's Medical Information (To be completed by the child's physician)

NOTE: Physician must be an M.D., D.O., or for hearing-related conditions, an Au.D.

The parent/legal guardian of the child listed above has applied for a medical grant with the Wichita's Littlest Heroes organization. Please complete the following medical information.

Child's Primary Diagnosis: _____

Child's Secondary Diagnosis (if applicable):_____

Other diagnoses:_____

How are the current diagnoses impacting the child's life? (check all that apply):

- ☐ Medically
- ☐ Socially
- ☐ Psychologically/Behaviorally
- ☐ Other:

I recommend the following (indicate and describe all that apply) and describe why they are needed:

☐ Medical and/or Surgical Treatments or Procedures: _____

☐ Durable or Disposable Items/Equipment: _____

☐ Therapy(ies):

_____

If recommended therapy is a drug, formula or medical food, has the manufacturer's representative been contacted for assistance? Please provide details:

_____
___

_____
___

☐ Other:

The goal of these therapies/treatments is:
_____

Has the child previously received these therapies/treatments?
_____
___

If yes, have they been effective?
_____

Additional Notes/Comments:
_____

Physician Information – Items marked with an (*) are required in order to process the form.

*Physician Name: Provider I.D. #: Address:
_____

*Signature:
_____

*Title: Telephone:
_____

*Date:
_____

Physician: Thank you for taking time to complete this information. Please return this form back to the child's parent and/or legal guardian so that they may attach it to their child's grant application.