DETERMINATION OF DISABILITY: (*Student's name*) *meets/does not meet* eligibility for special education under the category of Orthopedic Impairment as defined as a severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures).

A student is eligible and in need of special education in the area of Orthopedic Impairment when he/she meets criteria in item 1, <u>one</u> of the criteria in item 2, and <u>four</u> of the criteria in item 3:

1). DOCUMENTATION OF A MEDICALLY DIAGNOSED ORTHOPEDIC IMPAIRMENT:
[ ] Written documentation by a licensed physician of a severe orthopedic impairment (<u>Insert diagnosis, physician's name, and date of physician's documentation)</u>

2). HIS/HER ORTHOPEDIC IMPAIRMENT ADVERSELY AFFECTS EDUCATIONAL PERFORMANCE (at least one must be checked):
[ ] A Lack of functional level in organizational or independent work skills (Data from observations, interviews, and checklists are summarized in IWAR).
[ ] An inability to manage or complete motoric portions of classroom tasks within time constraints (Data from observations, interviews, and checklists are summarized in IWAR).

3). The orthopedic impairment results in a pattern of unsatisfactory educational performance as determined by a comprehensive evaluation explained throughout the current IWAR, which DOCUMENT THE REQUIRED COMPONENTS evident in items 1 and 2 above. Eligibility findings must be supported by current or existing data from the sources indicated below (at least four must be checked):
[ ] District-wide, state-wide, or other criteria referenced tests (e.g. MAP, NDSA, DIBELs, etc.)
[ ] Interviews conducted with classroom teachers and the student's parents or guardians
[ ] One or more documented observation in the classroom or other learning environment that indicates discrepancy from peers (Best Practice would be three observations) Date_____
[ ] A review of the student's health history, including verification of medical diagnosis and health condition
[ ] Review of student's records

Data for determining eligibility was gathered from (List multiple resources, a minimum of one observation in a daily routine setting required):
[ ] Cumulative file review
[ ] Review of previous accommodation, modifications, and/or interventions
[ ] Review of classroom based assessments
[ ] Interview Information (Teacher, Parent, Student)
[ ] Observation(s) (e.g., classroom, large group, small group, etc.) Date(s): _____
[ ] A review of the student's health history, including verification of medical diagnosis
[ ] Checklists and/or Tests:.(i.e., Brigance Screen, Peabody Developmental Motor Scale, Day-C, Carolina Test of Gross Motor Development)
[ ] Other: