

Appendix C

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VERY HIGH-RISK GROUP

MEDICAL REPORT FROM TREATING CONSULTANT: COVID 19 RISK ASSESSMENT

Employer (ETB) Name:	
Address:	
Employee's Place of Employment:	

OHS Provider's Name:	
Address:	

Patient Name:	
Date of Birth:	
Home Address:	

The above-named employee of Institute of Technology Sligo has indicated that he/she may fall into the Very High-Risk Group as defined by current HSE guidelines. The Department of Education & Skills published the Circular "*Coronavirus (COVID-19): Arrangements for staff employed in approved posts funded by monies provided by the Oireachtas*". Under the terms of this Circular the employee is required to furnish the employer's OHS provider with a report from his/her treating consultant with specific information regarding the employee's underlying medical condition(s).

The cost of compilation of all such reports is the responsibility of the employee.

You are requested to complete this form and return it to your patient (details supplied above) for onward submission to the employer's OHS provider.

Consultant Name:	
Consultant Speciality:	
Exact diagnosis:	
Current treatment, including strengths and dosages:	
Additional medical conditions or complications:	
Comments if any:	

Consultant's Signature:	
Date:	
Consultant stamp:	