

Eligibility Criteria: Other Health Impaired

Student's Name: _____ Date: ____/____/____

School: _____

Other Health Impairment means having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness to the educational environment, that is due to chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever, nephritis, arthritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, Tourette Syndrome, attention deficit disorder or attention deficit hyperactivity disorder, and diabetes; and adversely affect a child's educational performance.

Both questions must be answered "yes" for a student to be eligible.

Please Note: The medical component of the eligibility assessment proceedings is required, must be available at the eligibility meeting, must be current (within previous 12 months) and must indicate a diagnosis.

Yes No Does the student exhibit limited strength, vitality or alertness, due to health problems that are chronic or acute?

- If yes, please check:
- tourette syndrome
 - heart condition
 - rheumatic fever
 - nephritis
 - asthma
 - sickle cell anemia
 - hemophilia
 - epilepsy
 - lead poisoning
 - leukemia
 - diabetes
 - ADHD*
 - Other condition (please specify): _____

Yes No Does this health condition adversely affect the student's educational performance (discrepancy of 1.5 standard deviations between ability and achievement)?

* In order to select ADHD all of the following responses below should be "Yes."

- a. Does the medical component support a diagnosis of ADHD? Yes No
- b. Does this student show evidence of early onset or chronicity of attentional/behavioral difficulties? Yes No
- c. Do results of behavioral checklists indicate ADHD? Yes No
- d. Are classroom behaviors significantly different from peers on a structured observation? Yes No
- e. Is there a marked impact on educational performance (discrepancy of 1.5 standard deviations between ability and achievement)? Yes No

For identification as a student with a disability and subsequently eligible for special education and related services all answers to the following questions must be "yes".

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. Does the student have a qualifying disability as defined by the Regulations Governing Special Education Programs for Children with Disabilities in Virginia (July 2009) and as defined by this criteria checklist? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If the student is defined as disabled by application of this criteria, is it also the conclusion of the eligibility group that the disability has an adverse effect on the student's educational performance? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. In addition, is it the conclusion of the eligibility group that, given evidence of a qualifying disability and of an adverse effect on educational performance, the student's condition requires specially designed instruction (special education) to address identified concerns? | <input type="checkbox"/> | <input type="checkbox"/> |