

Preparing For Tele-Appointments: Clinician Form

TELE-APPOINTMENT DATE & TIME: _____

TELE-APPOINTMENT LINK: _____

HEALTH CARE PRACTITIONER: _____

THE TELE-APPOINTMENT IS WITH:

- | | | |
|---|---|--|
| <input type="checkbox"/> AUDIOLOGIST | <input type="checkbox"/> PHYSICAL THERAPISTS | <input type="checkbox"/> SPEECH LANGUAGE PATHOLOGIST |
| <input type="checkbox"/> DIETICIAN | <input type="checkbox"/> PSYCHOLOGIST | <input type="checkbox"/> SOCIAL WORKER |
| <input type="checkbox"/> NEUROPSYCHOLOGIST | <input type="checkbox"/> RECREATIONAL THERAPIST | <input type="checkbox"/> VISION SPECIALIST |
| <input type="checkbox"/> OCCUPATIONAL THERAPIST | <input type="checkbox"/> SPECIAL EDUCATOR | <input type="checkbox"/> OTHER: _____ |

WHAT IS THE PURPOSE OF THE TELE-APPOINTMENT?

- | | | |
|-------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> SCREENING | <input type="checkbox"/> TREATMENT | <input type="checkbox"/> CONSULTATION |
| <input type="checkbox"/> ASSESSMENT | <input type="checkbox"/> MONITORING | <input type="checkbox"/> OTHER: _____ |

WHO IS THE TELE-APPOINTMENT TARGET?

- CHILD/YOUTH PARENT/CAREGIVER CHILD/YOUTH AND PARENT/CAREGIVER

THE TELE-APPOINTMENT WILL FOCUS ON:

THE CHILD/YOUTH'S:

THE CAREGIVER'S:

FOCUS 1: _____
 FOCUS 2: _____
 FOCUS 3: _____

FOCUS 1: _____
 FOCUS 2: _____
 FOCUS 3: _____

FOR THE TELE-APPOINTMENT, YOU WILL NEED TO HAVE THESE ITEMS READY:

- | | |
|--|--|
| <input type="checkbox"/> COLORED PENCILS AND PAPER | <input type="checkbox"/> SELF-CARE ITEMS (E.G., TOOTHBRUSH, HAIR COMB) |
| <input type="checkbox"/> CHILD'S CLOTHES (E.G., T-SHIRT, PANTS, SHOES) | A PLACE FOR THE CHILD TO: |
| <input type="checkbox"/> FEEDING ITEMS | <input type="checkbox"/> SIT AT A DESK <input type="checkbox"/> LIE DOWN <input type="checkbox"/> PLAY |
| <input type="checkbox"/> BALL | <input type="checkbox"/> MOVE AROUND <input type="checkbox"/> JUMP |
| <input type="checkbox"/> TOYS: _____ | <input type="checkbox"/> OTHER: _____ |

OTHER COMMENTS:
