Insert for Special Diet Allowance Application Form

New conditions eligible for a Special Diet Allowance (SDA)

Starting December 1, 2014, the following new conditions are eligible for a Special Diet Allowance:

- Congenital heart defect – Have had: a Ross procedure or an arterial switch procedure or coexisting coarctation of the aorta

- Rett Syndrome (BMI <18.5)

- Unintended Weight Loss due to Interferon treatment of Hepatitis C (BMI <25)

1. Instructions for applicants with Congenital heart defect – Have had: a Ross procedure or an arterial switch procedure or coexisting coarctation of the aorta

The health care professional must complete section 2 of the SDA application form, fill out the box below, and sign below:

☐ Congenital heart defect – Have had: a Ross procedure or an arterial switch procedure or coexisting coarctation of the aorta	☐ 6m ☐ 12m ☐ indefinite	Health care professional's initials

I confirm that the applicant requires a special diet for the above medical condition and that the information I have provided is true in my professional opinion.

_____
Signature of approved health care professional

_____
Date (yyyy/mm/dd)

The applicant must complete section 1 and sign section 4 of the SDA application form and return it, along with this completed application insert.

Note: Where an SDA application also indicates Diabetes, Gestational Diabetes, Hypertension, Extreme Obesity, Hypercholesterolemia/ Hyperlipidemia, or Prader-Willi Syndrome, the applicant will only be eligible for one allowance, the highest.

2. Instructions for applicants with Rett Syndrome (BMI <18.5)

The health care professional must complete section 2 of the SDA application form, fill out the box below, and sign below:

☐ Rett Syndrome (BMI <18.5)	☐ 6m ☐ 12m	Health care professional's initials

I confirm that the applicant requires a special diet for the above medical condition and that the information I have provided is true in my professional opinion.

_____
Signature of approved health care professional

_____
Date (yyyy/mm/dd)

The applicant must complete section 1 and sign section 4 of the SDA application form and return it, along with this completed application insert.

Notes:

1) Where an SDA application also indicates one or more of the following conditions: Chronic Hepatitis C (BMI <25), Chronic wounds or burns (any stage or percentage of body surface area), Renal Failure (Pre-Dialysis or Peritoneal /Haemodialysis), or any unintended weight loss conditions, the applicant will only be eligible for one allowance, the highest.

2) The SDA for Rett Syndrome (BMI <18.5) cannot be indefinite because patients need to have their BMI reassessed to ensure it is within the limit.

3. Instructions for applicants with Unintended Weight Loss due to Interferon treatment of Hepatitis C (BMI <25)

If the applicant has experienced unintended weight loss due to Interferon treatment of Hepatitis C (BMI <25), the health care professional must check the corresponding unintended weight loss category in the appropriate section on page 3 of the application. The length of time the special diet is required must also be indicated and initialed by the approved health care professional.

As per current policy, identification of the medical condition for which the applicant is eligible under the unintended weight loss category is not required on the application form but should be documented in the patient's medical record.

The applicant must complete section 1 and sign section 4 of the SDA application form and return it, along with this completed application insert.

Notes:

1) Where an SDA application also indicates one or more of the following conditions: Chronic Hepatitis C (BMI <25), Chronic wounds or burns (any stage or percentage of body surface area) or Renal Failure (Pre-Dialysis or Peritoneal /Haemodialysis), the applicant will only be eligible for one allowance, the highest.

2) Only one unintended weight loss special diet will be provided per applicant/recipient.

If you have any questions:

If you have any questions about the form, please contact the person listed at the bottom of page 3 of the SDA application form.