

# Medical Recommendation for a Service Dog



This form is to be completed by a physician or nurse practitioner, confirming the requirement for a service dog.

Please ensure the appropriate sections of this form are completed. Do not leave blanks, as this form will not be considered if it is not completed.

Please complete this application form and submit it with your application for a service dog team certificate.

Direct questions to: Department of Justice, Service Dog Program  
Phone: **902-424-8805** or toll free **1-888-760-5577 (#6)**  
Email: ***servicedogs@novascotia.ca***  
Fax: **902-424-0700**

Please complete parts 1, 2, and 4 and ask your doctor or nurse practitioner to complete part 3.

You will be responsible for any fees your doctor may charge for completing this form. If you are in receipt of provincial health benefits, please speak to your case manager regarding subsidy.

## Part 1 Applicant/Patient Information

Name \_\_\_\_\_  
Surname Legal Given Middle

Date of Birth \_\_\_\_\_  
yyyy/mm/dd

Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
City/Town Province/Territory Postal Code

## Part 2 Parent/Guardian Information *(Secondary Handler for Service Dog, if applicable)*

Name \_\_\_\_\_  
Surname Legal Given Middle

Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
City/Town Province/Territory Postal Code

## Part 3 Instructions to Physician and Medical Information

The attached list on page 3 and 4 provides guidelines with regards to aspects of disabilities that may warrant the use of a service dog for daily living, and the types of tasks that a service dog may perform to assist a person with a disability. The list of tasks is not exhaustive.

A service dog must be essential to an individual's ability to function in day to day living and to be present in all or most situations in order to lead as full and independent a life as possible.



## Part 4 Patient's Certification and Consent to Release Information

1. I certify that the information I have given to the physician or nurse practitioner completing this report is, to the best of my knowledge, true and complete.
2. I understand that inaccurate, misleading, missing or false information may lead to denial or cancellation of my service dog team certificate.
3. I authorize the release of this medical report and/or health information related to my application for a Service Dog Team Certificate under the Service Dog Act to be disclosed to staff of the Service Dog Program. I also authorize the tasks my service dog is to preform to mitigate aspects of my disability be provided to the organization or person designated to perform service dog assessments.

Patient \_\_\_\_\_  
Name Date (yyyy/mm/dd) Signature

This information will be used for the purpose of determining eligibility for a Service Dog Team Identification Card as provided under the Service Dog Act. The personal information provided on this form is collected under the authority of the Service Dog Act and managed in accordance with the Freedom of Information and Protection of Privacy Act (FOIPOP). Should you have any questions, contact the Registrar, Service Dog Act.

### Service Dog Medical Form Guidelines

The following list provides guidelines with regard to conditions that may warrant the use of a service dog for daily living and the types of tasks that a service dog may perform to assist a person. The list of tasks is not exhaustive.

#### Common Tasks Performed by Service Dogs

**Hearing** Hearing impairment to such a degree that the person requires a service dog to:

1. Alert handler to name being called
2. Alert handler to phone ring
3. Alert handler to oncoming cars
4. Alert handler to any potential dangers
5. Alert handler in the presence of others
6. Other auditory support tasks: *please explain*

**Mobility** Physical disability or mobility issues to such a degree that the person requires a service dog to:

7. Retrieve dropped items
8. Hold items
9. Carry items in a store or to another room
10. Place items on the counter at the cash register
11. Open/close doors
12. Fetch a cane, walker or other equipment
13. Assist handler to get up from a chair or the floor
14. Turn lights on and off
15. Assist with the transfer from wheelchair to chair (*as in restaurant*)
16. Reach for items from a shelf or shopping cart
17. Answer a (cell) phone when it rings
18. Alert others in the event of an emergency regarding handler
19. Alert handler to hazards such as steps, curbs, potholes or other obstacles

- 20. Fetch medications if needed
- 21. Assist with stairs
- 22. Assist with ambulation
- 23. Retrieve a purse, wallet, backpack or travel bag
- 24. Carry mail
- 25. Carry an item to another person
- 26. Pull or manoeuvre a wheelchair
- 27. Assist with shopping cart or basket
- 28. Push handicap or elevator buttons
- 29. Safely manoeuvre handler in a parking lot
- 30. Assist in a public restroom
- 31. Put an item away
- 32. Emergency body pull
- 33. Other mobility support tasks; *please explain*

**Developmental** Developmental disability such as Autism Spectrum Disorder or similar condition where, under the supervision of a parent or guardian, a service dog can:

- 34. Calm child when agitated
- 35. Prevent the child from self-harming
- 36. Prevent the child from bolting
- 37. Facilitate social interactions for the child
- 38. Other development support tasks: *please explain*

**Medical** Conditions such as seizure disorders, diabetes, cardiac rhythm disturbances, etc. where a person would benefit from a service dog that can:

- 39. Alert handler to changes in medical condition, such as low blood sugar, impending seizures or cardiac rhythm disturbances
- 40. Fetch medication if needed
- 41. Fetch the phone so handler can call for help
- 42. Alert others to the need for assistance
- 43. Reassure handler during medical crisis
- 44. Watch over handler until help arrives
- 45. Assist handler in sitting or lying down in cases of impending medical crisis
- 46. Assist handler in getting up from floor or chair after medical crisis
- 47. Other medical alert or response tasks: *please explain*

**Psychological** Psychological conditions such as Post-traumatic Stress Disorder or other psychological conditions where the person requires a service dog to:

- 48. Provide tactile stimulations orientating handler in the present
- 49. Assist with locating keys or telephone
- 50. Fetch medication if needed
- 51. Brace or lean against handler
- 52. Assist handler to leave a social situation, as with panic attacks
- 53. Facilitate social interactions
- 54. Assist handler to to the presence of other person
- 55. Assist handler in creating a safe personal space
- 56. Assist handler in safely crossing street
- 57. Assist handler in safely manoeuvring across parking lot
- 58. Assist handler to changes in mood or mental status
- 59. Buffer handler in crowded place
- 60. Other psychological support tasks; *please explain*