

PSYCHIATRIC:

#180	Adjustment disorders	Due to your history of adjustment disorder (NVIC 04-08 condition #180), please submit a recent evaluation completed within the last 12 months from your treating psychiatrist, psychologist, or treating physician that includes a current evaluation of the condition, documentation of date of diagnosis and DSM Axis I, symptoms experienced, hospitalizations due to the condition, current treatment plan with all medications taken with side effects and period of use, and prognosis for continued service as a mariner. All information requested should be within the past twelve months unless otherwise noted.
#181	ADHD or ADD	Due to your history of ADD (NVIC 04-08 condition #181), please submit a recent evaluation completed within the last 12 months from your treating psychiatrist, psychologist, or treating physician that includes a current evaluation of the condition, documentation of date of diagnosis and DSM Axis I, documentation of testing methodology used to make diagnosis, symptoms experienced, current treatment plan with all medications taken with side effects and period of use, and prognosis for continued service as a mariner. All information requested should be within the past twelve months unless otherwise noted.
#182	Bipolar disorder	Due to your history of bipolar disorder (NVIC 04-08 condition #182), please submit a complete formal evaluation of your condition (completed within the last 12 months) from your treating mental health provider to include the history of the presentation, hospitalization history, overt manic or severe depressive episodes, presence of any thought disorders, mental status exam, all medications used to date, impairing side effects, therapeutic efficacy, medication compliance, stability on current dose and prognosis for performing merchant mariner duties. All information requested should be within the past twelve months unless otherwise noted.
#183	Dysthymic/bereavement disorder	Due to your history of _____ (NVIC 04-08 condition #183), please submit a recent evaluation completed within the last 12 months from your treating psychiatrist, psychologist, or treating physician that includes a current evaluation of the condition, documentation of date of diagnosis and DSM Axis I, symptoms experienced, hospitalizations due to the condition, current treatment plan with all medications taken with side effects and period of use, and prognosis for continued service as a mariner. All information requested should be within the past twelve months unless otherwise noted.

#184	Depression	Due to your history of depression (NVIC 04-08 condition #184), please submit a recent evaluation completed within the last 12 months from your treating psychiatrist, psychologist, or treating physician that includes a current evaluation of the condition, documentation of date of diagnosis and DSM Axis I, symptoms experienced, hospitalizations due to the condition, current treatment plan with all medications taken with side effects and period of use, and prognosis for continued service as a mariner. All information requested should be within the past twelve months unless otherwise noted.
#185	Psychotic disorder	Due to your history of _____ (NVIC 04-08 condition #185), please submit a psychiatry evaluation completed within the last 12 months to include current evaluation of the condition, documentation of date of diagnosis and DSM Axis I, symptoms experienced, hospitalizations due to the condition, recurrent episodes, disturbances of thought, current treatment plan with side effects and period of use. All information requested should be within the past twelve months unless otherwise noted.
#186	History of substance or alcohol abuse, as defined in current DSM, within the last 5 years	Due to your history of _____ (NVIC 04-08 condition #186), please submit an evaluation report completed within the last year from a qualified SAP (substance abuse professional) or physician certified by the American Society of Addiction Medicine. Include a clear recommendation on the safety of the individual to work, documentation of compliance with treatment recommendations, maintenance of sobriety, AA/NA meeting attendance with sponsor letter, and reports from the rehabilitation clinic if available. All information requested should be within the past twelve months unless otherwise noted.
#186a	History of substance or alcohol dependence as defined in current DSM	Due to your history of _____ (NVIC 04-08 condition #186a), please submit an evaluation report completed within the last year from a qualified SAP (substance abuse professional) or physician certified by the American Society of Addiction Medicine. Include a clear recommendation on the safety of the individual to work, documentation of compliance with treatment recommendations, maintenance of sobriety, AA/NA meeting attendance with sponsor letter, and reports from the rehabilitation clinic if available. All information requested should be within the past twelve months unless otherwise noted.
#187	History of suicide attempt in last 5 yrs	Due to your history of suicide attempt (NVIC 04-08 condition #187), please submit psychiatry evaluation completed within the last 12 months to include current evaluation of the condition, documentation of date of diagnosis and DSM Axis I, symptoms experienced, recurrent episodes, disturbances of thought, current treatment plan with side effects and period of use, and prognosis for work as a merchant mariner. All information requested should be within the past twelve months unless otherwise noted.

#188	Organic mental disorder causing cognitive defect	Due to your history of _____ (NVIC 04-08 condition #188), please submit psychiatric consultation completed within the last 12 months with complete neurological evaluation of the condition, summary of all pertinent diagnostic imaging and laboratory studies to date (with copies if available), current treatment plan, and neuropsychological testing as clinically indicated . All information requested should be within the past twelve months unless otherwise noted.
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