TEXAS WORKFORCE SOLUTIONS

Texas Workforce Commission
Vocational Rehabilitation Services

Cardiac Evaluation Report

VR3103 Instructions

Use

This form is completed by a physician trained in cardiac conditions who has evaluated the customer. It is used by the counselor to help determine the customer's eligibility, additional diagnostics needed, and/or a plan for rehabilitation services. The form includes information about the customer's medical history, medications, functional ability, risk factors, treatment, and prognosis.

Copies and Distribution

No copies are required. The completed form is placed in the customer's paper file. If the customer's case is submitted to the state medical director for guidance or a decision about services, a copy of the form is included in the courtesy file.

Retention

The completed form is part of the customer's paper file and is retained until the end of the fiscal year the case file is closed, plus five years.