**581-015-2160 with track changes for Board to consider 9-1-2020**

**Orthopedic Impairment**

**(1)** **Early Intervention** (age birth through two years of age in **accordance with OAR 581-015-2700(10)**): "Orthopedic Impairment" means a severe orthopedic impairment currently affecting or has the potential to significantly affect an infant or toddler’s developmental progress The infant or toddler's disability does not need to be presently affecting the infant or toddler's development for the infant or toddler to be eligible for Early Intervention services. The term includes impairments caused by a congenital anomaly, impairments caused by disease (e.g., poliomyelitis, bone tuberculosis), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures). Orthopedic impairments can be divided into three main areas: neuromotor impairments (e.g., cerebral palsy, spina bifida), degenerative diseases (e.g., muscular dystrophy), and musculoskeletal disorders (e.g., juvenile rheumatoid arthritis, limb deficiency). The specific characteristics of an individual who has an orthopedic impairment will depend on the specific disease and its severity, as well as additional individual factors.

(2) **Early Intervention:** If an infant or toddler is suspected of having an orthopedic impairment, a comprehensive evaluation must be conducted, including the following:

(a) Medical examination indicating a diagnosis of an orthopedic or neuromotor impairment or a description of the motor impairment given by:

(A) A physician licensed under ORS chapter 677 or by the appropriate authority in another state;

(B) A naturopathic physician licensed under ORS chapter 685 or by the appropriate authority in another state;

(C) A nurse practitioner licensed under ORS 678.375 to 678.390 or by the appropriate authorityin another state; or

(D) A physician assistant licensed under ORS 677.505 to 677.525 or by the appropriate authority in another state.

(b) Motor assessment. A standardized motor assessment, including the areas of fine motor, gross motor and self-help, when appropriate, given by a specialist knowledgeable about orthopedic or neuromotor development:

(A) A physical therapist licensed under ORS chapter 688 or by the appropriate authority in another state or;

(B) An occupational therapist licensed under ORS chapter 675 or by the appropriate authority in another state,

(c) Any additional assessments necessary to determine the impact of the suspected disability; and

(d) Any additional evaluations or assessments necessary to identify the infant or toddler's educational needs.

 (3) **Early Intervention:** To be eligible as an infant or toddler with an orthopedic impairment, the infant or toddler must meet all of the following criteria:

(a) The infant or toddler has a motor impairment that results in deficits in the quality, speed or accuracy of movement. These deficits must be documented by a score of two or more standard deviations below the mean in fine motor skills, gross motor skills, or self-help skills, or functional deficits in at least two of these three motor areas; and

(b) The infant or toddler's condition is permanent or is expected to last for more than 60 calendar days.

(4) **Early Intervention:** For an infant or toddler to be eligible for early intervention services as an infant or toddler with an orthopedic impairment, the eligibility team must determine that:

(a) The infant or toddler has an orthopedic impairment as defined in the rule; and

(b) The infant or toddler is eligible for early intervention services in accordance with OAR 581-015-2780.

**(5)** **Early Childhood Special Education:** (age 3 through 5) and School Age (age 5 through 21): "Orthopedic Impairment" means a severe orthopedic impairment that adversely affects a child's developmental progress (ages 3 through 5) or educational performance (ages 5 through 21). The term includes impairments caused by a congenital anomaly, impairments caused by disease (e.g., poliomyelitis, bone tuberculosis), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures). Orthopedic impairments can be divided into three main areas: neuromotor impairments (e.g., cerebral palsy, spina bifida), degenerative diseases (e.g., muscular dystrophy), and musculoskeletal disorders (e.g., juvenile rheumatoid arthritis, limb deficiency). The specific characteristics of an individual who has an orthopedic impairment will depend on the specific disease and its severity, as well as additional individual factors.

6) **Early Childhood Special Education and School Age:** If a child is suspected of having an orthopedic impairment, a comprehensive evaluation must be conducted, including the following:

(a) Medical examination indicating a diagnosis of an orthopedic or neuromotor impairment or a description of the motor impairment given by:

(A) A physician licensed under ORS chapter 677 or by the appropriate authority in another state;

(B) A naturopathic physician licensed under ORS chapter 685 or by the appropriate authority in another state;

(C) A nurse practitioner licensed under ORS 678.375 to 678.390 or by the appropriate authority

in another state; or

(D) A physician assistant licensed under ORS 677.505 to 677.525 or by the appropriate authority in another state.

(b) Motor assessment. A standardized motor assessment, including the areas of fine motor, gross motor and self-help, when appropriate, given by a specialist knowledgeable about orthopedic or neuromotor development:

(A) A physical therapist licensed under ORS chapter 688 or by the appropriate authority in another state or;

(B) An occupational therapist licensed under ORS chapter 675 or by the appropriate authority in another state,

(c) Other:

(A) Any additional assessments necessary to determine the impact of the suspected disability:

(i) On the child's developmental progress for a preschool child (age 3 through 5); or

(ii) On the child's educational performance for a school-age child (age 5 through 21); and

(d) Any additional evaluations or assessments necessary to identify the child's educational needs.

(7) **Early Childhood Special Education and School Age:** To be eligible as a child with an orthopedic impairment, the child must meet all of the following criteria:

(a) The child has a motor impairment that results in deficits in the quality, speed or accuracy of movement. These deficits must be documented by a score of two or more standard deviations below the mean in fine motor skills, gross motor skills, or self-help skills, or functional deficits in at least two of these three motor areas; and

(b) The child's condition is permanent or is expected to last for more than 60 calendar days.

(8) **Early Childhood Special Education and School Age:** For a child to be eligible for special education services as a child with an orthopedic impairment, the eligibility team must determine that:

(a) The child has an orthopedic impairment as defined in this rule; and

(b) The child is eligible for special education services in accordance with OAR 581-015-2795 and/or OAR 581-015-2120.

**Statutory/Other Authority:** ORS 343.035(1), 343.045, 343.146 & 343.157;
**Statutes/Other Implemented:** ORS 343.035(1), 343.045, 343.146, 343.157, 34 CFR 300.8 & 300.306
**History:**
Renumbered from 581-015-0051, ODE 10-2007, f. & cert. ef. 4-25-07
ODE 2-2003, f. & cert. ef. 3-10-03
ODE 8-2001, f. & cert. ef. 1-29-01
ODE 11-2000, f. 5-3-00, cert. ef. 7-1-00
EB 22-1995, f. & cert. ef. 9-15-95
EB 16-1992, f. & cert. ef. 5-13-92
EB 25-1991(Temp), f. & cert. ef. 11-29-91
1EB 7-1986, f. & ef. 2-24-86
Reverted to 1EB 29-1978, f. & ef. 7-20-78
1EB 18-1983(Temp), f. & ef. 12-20-83
1EB 29-1978, f. & ef. 7-20-78