



**Minnesota**  
**Annual Conference**  
of the United Methodist Church

## PHYSICIAN'S MEDICAL SUMMARY

The Discipline of the United Methodist Church requires that each candidate for ordination or licensing present a satisfactory certificate of good health by a physician on a prescribed form. Your consideration in supporting this candidate with this requirement is appreciated.

Candidate's Full Name: \_\_\_\_\_

1. Overall Health Assessment:
  
  
  
  
  
  
  
  
  
  
2. It is recommended that an individual with this assessment needs a regular check-up every \_\_\_\_ years.
  
  
3. An individual with this assessment may be at higher risk for the following:
  
  
  
  
  
  
  
  
  
  
4. With appropriate treatment, follow up and patient compliance, these conditions may be expected to:
  - a. Resolve completely
  - b. Remain stable without progression
  - c. Progress gradually
  - d. Progress rapidly
  - e. Impair the ability of the candidate to meet the physical, mental, and emotional demands of a pastor

5. Other comments:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Credentials (MD, DO, PA, et.al.) \_\_\_\_\_