



University of San Francisco Student Disability Services

Attention Deficit/Hyperactivity Disorder (ADHD) Documentation Guidelines

Under the Americans with Disabilities Act (ADA), the ADA Amendments Act of 2008, and Section 504 of the Rehabilitation Act of 1973, individuals with disabilities are protected from discrimination and may be eligible for services. In determining eligibility for accommodations under the Americans with Disabilities Act (ADA), the student must demonstrate that a qualified professional has established a formal diagnosis of a disability and evidence of a "substantial limitation" or impairment in a major life activity such as learning.

The following guidelines are intended to provide the evaluating professional the information necessary to document and validate the existence of ADHD, its impact on the individual's educational performance, and the need for reasonable accommodation(s).

It is the responsibility of the student seeking accommodations to obtain and present his/her documentation to Student Disability Services. Any correspondence regarding adequacy of the documentation will be communicated to the student. It is the student's responsibility to obtain additional information or assessment if requested. **The final determination of accommodation eligibility rests with Student Disability Services based on a review of the provided documentation and personal interview as outlined below.** All information provided to Student Disability Services is confidential and is not released without written consent of the student except on a need-to-know basis.

Qualifications of the Evaluator

Professionals conducting assessments rendering diagnoses of ADHD and making recommendations for accommodations must be qualified to do so. Comprehensive training and relevant experience in differential diagnosis and the full range of psychiatric disorders are essential. The name, title and professional credentials of the evaluator, including information about license or certification as well as the area of specialization, employment and state or province in which the individual practices should be clearly stated in the documentation. The following professionals would generally be considered qualified to evaluate and diagnose ADHD **provided they have comprehensive training in the differential diagnosis of ADHD and direct experience with an adolescent or adult ADHD population:** clinical psychologists, neuropsychologists, psychiatrists, and other relevantly trained medical doctors.

Use of diagnostic terminology indicating an ADHD by someone whose training and experience are not in these fields is not acceptable. It is also not

appropriate for professionals to evaluate members of their own families. All reports should be on letterhead, typed, dated, signed and otherwise legible.

Documentation Should be Current

Because the provision of all reasonable accommodations and services is based upon assessment of the current impact of the disability on current academic performance, it is in an individual's best interest to provide recent and appropriate documentation. Student Disability Services requires that documentation be no more than 3 years old.

Although prior documentation is useful in determining appropriate services in the past, current documentation must validate the need for services based on the individual's present level of functioning in the educational setting. A school plan such as an IEP (individualized educational plan) or a 504 plan is insufficient documentation in and of itself but can be included as part of a more comprehensive evaluative report. However, a prior history of accommodations without demonstration of a current need does not in itself warrant the provision of like accommodations. If no prior accommodations were provided, the qualified professional and/ or the candidate must include a detailed explanation of why no accommodations were needed in the past and why accommodations are needed at this time.

Comprehensive Documentation

Documentation should be comprehensive and must include the following:

- **Evidence of Early Impairment**
Relevant historical information is essential since ADHD is by definition, first exhibited in childhood and manifests itself in more than one setting.
- **Evidence of Current Impairment**
In addition to providing evidence of childhood history of impairment, please also include evidence of ongoing impulsive/hyperactive or attentive behaviors that significantly impair functioning in two or more settings. Please also include diagnostic interviews including self-reports and third party sources.
- **Rule out of Alternative Diagnoses or Explanations**
The evaluator must investigate and discuss the possibility of dual diagnoses and alternative or coexisting mood, behavioral, neurological and/ or personality disorders that may confound the diagnosis of ADHD.
- **Specific Diagnosis**
The report must include a specific diagnosis of ADHD based on the DSM-IV diagnostic criteria. The diagnostician should use direct language in the diagnosis and avoid using terms such as "suggests", "is indicative of", or "attention problems". Individuals who report only problems with organization, test anxiety, memory or concentration in selective situations do not fit the prescribed diagnostic criteria for ADHD. Please note that a positive response to medication by itself does not confirm a diagnosis, or does use of

medication in and of itself either support or negate the need for accommodation.

- **Relevant Testing**

Neuropsychological or psychoeducational assessment is important in determining the current impact of the disorder on the individual's ability to function in academically-related settings. The evaluator should objectively review and include within the evaluation report relevant background information to support the diagnosis. If grade equivalents are reported, they must be accompanied by standard scores and/or percentiles. Test scores or subtest scores alone should not be used as a sole measure for the diagnostic decision regarding ADHD. Selected subtest performance tests do not in and of themselves establish the presence or absence of ADHD. Checklists and/ or surveys can serve to supplement the diagnostic profile but in and of themselves are not adequate for the diagnosis of ADHD and do not substitute for clinical observations and sound diagnostic judgment. All data must logically reflect a substantial limitation to learning for which the individual is requesting the accommodation.

Each Accommodation Recommended by the Evaluator Should Include a Rationale

The evaluator must describe the impact, if any, of the diagnosed ADHD on a specific major life activity as well as the degree of impact on the individual. The diagnostic report may include specific recommendations for accommodations at postsecondary institutions. A detailed explanation as to why each accommodation is recommended must be provided and should be correlated with specific functional limitations determined through interview, observation, and and/ or testing.

A reasonable accommodation within the evaluator's report may or may not constitute a reasonable accommodation at the University of San Francisco.

**These guidelines have been adapted from The Consortium Guidelines for Documentation of Attention-Deficit/Hyperactivity Disorder in Adolescents and Adults, (1998), the Consortium on ADHD documentation.*