Students who are requesting support services from the Office of Disability Services at Indiana University Southeast are required to submit documentation indicating that a disability substantially limits some major life activity, such as learning, to verify eligibility under the ADA of 1990. The following guidelines are provided in the interest of assuring that the documentation validates the presence of ADHD, demonstrates an impact of the disability on learning, and supports the request for accommodations and services.

1. **A Qualified Professional Must Conduct the Evaluation**
   Professionals conducting assessments and rendering diagnoses of AD/HD and making recommendations for appropriate 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 evaluation must be performed by a professional who is certified or licensed and trained in psychiatric, psychological, neuropsychological and/or psycho-educational assessment of adults.

2. **Documentation Must be Current**
   The Office of Disability Services acknowledges that once a person is diagnosed as having a qualified disability under the Americans with Disabilities Act the disability is normally viewed as life-long. Although the disability will continue, the severity of the condition may change over time. Therefore, the evaluation must present a current picture of how the student performs. Generally the evaluation should have been completed within the last three years. Because the provision of accommodations and services is based on the current impact of the student’s disability on learning in the college setting, it is in the student’s best interest to provide recent and appropriate documentation. If changes have occurred in the student’s performance since the last assessment or if prescribed medications have been altered, the student may be required to submit updated information. The Office of Disability Services reserves the right to request updated or augmented documentation in order to have a more accurate picture of the current level of functioning.

3. **Documentation Must be Comprehensive**
   A comprehensive evaluation should provide information about the history of the condition and verify the existence of a current condition. The report should include the following:
   
   a) **Evidence of early impairment**: Because ADHD is by definition in the DSM-IV, first exhibited in childhood (although it may not have been formally diagnosed) and manifests itself in more than one setting, relevant historical information is essential. The following should be included in a comprehensive assessment: clinical summary of objective historical information, establishing symptomology indicative of ADHD throughout childhood, adolescence, and adulthood as
garnered from transcripts, report cards, teacher comments, tutoring evaluations, and past psycho-educational testing; and third party interviews when available.

b) Evidence of current impairment: The documentation must not only establish a diagnosis of ADHD, but must also demonstrate the current impact of the ADHD on an individual’s ability to function in an academic setting. A complete psycho-educational assessment is necessary in order to determine eligibility for services. This would include:

Rating scales
Wender Utah, Brown Attention-Activation Disorder Scale, Beck Anxiety Inventory, Hamilton’s Depression Rating Scale, Conner’s Teacher and Parent Rating Scale

Aptitude testing
A complete intellectual assessment with all subtests and standard scores reported is essential. Examples include, WAIS-III, Stanford-Binet IV, Woodcock-Johnson Psychoeducational Battery: Test of Cognitive Ability.

Achievement testing
A comprehensive academic achievement battery is essential, with all subtests and standard scores reported for those subtests administered. Screening instruments, or abbreviated testing instruments do not provide enough detailed information and may not be sufficient to determine eligibility and accommodations. The battery must include current levels of academic functioning in relevant areas such as reading (decoding and comprehension), mathematics, and oral and written language. Examples include, Woodcock-Johnson Psycho-educational Battery III: Test of Achievement, Weschler Individual Achievement Test (WAIT), Stanford Test of Academic Skills (TASK), Scholastic Abilities Test for Adults (SATA).

Objective measurements of attention
(CCPT, TOVA, IVA, GDS, etc)

4. Informal Assessment
Social-emotional assessment is helpful in order to rule-out a primary emotional basis for learning difficulties. Social-emotional status should be assessed and discussed. If applicable, a mental health diagnosis should be clearly stated. Colleges need to know differential diagnosis of psychological disorders that impact upon academics from learning disabilities. College is typically quite stressful for students who have disabilities. In an attempt to better serve students, it is helpful to know about their personality characteristics, psychological welfare, self-esteem and ability to respond to stress.
5. Interpretative Summary

A well-written interpretative summary based on a comprehensive evaluative process is a necessary component of the documentation. Because ADHD is in many ways a diagnosis that is based upon the interpretation of historical data and observation, as well as other diagnostic information, it is essential that professional judgment be utilized in the development of a summary, which must include:

a) demonstration of the evaluator's having ruled out alternative explanations for inattentiveness, impulsivity, and/or hyperactivity as a result of psychological or medical disorders or noncognitive factors.

b) indication of how patterns of inattentiveness, impulsivity, and/or hyperactivity across the life span and across settings are used to determine the presence of ADHD.

c) indication of whether or not the candidate was evaluated while on medication, and whether or not the prescribed treatment produced a positive response.

d) indication and discussion of the substantial limitation to learning presented by the ADHD and the degree to which it affects the individual in a higher education setting.

e) indication as to why specific accommodations are needed and how the effects of ADHD symptoms, as designated by the DSM-IV, are mediated by the accommodations.

All documentation must include the following:

a) Names of assessment instruments used and dates of testing.

b) Quantitative and qualitative information which supports the diagnosis (including subtest scores).

c) The areas of educational impact and the severity of the condition.

d) Previous history of the disability and verification of any previous testing.

e) Recommendations for prescriptive treatments.

f) Notation of medications prescribed, if any, and potential impact on learning.

g) Additional observations or recommendations, which could assist us in adequately serving the student.
h) The names, titles, addresses, phone numbers, state of license and license number of the evaluator(s).

Please note that in reviewing the specific accommodation requested by the student or recommended by the physician/evaluator, the Office Disability Services may find that while a recommendation is clinically supported, it is not the most appropriate accommodation given the requirements of a particular student’s academic program. In addition, the Office of Disability Services may also propose clinically supported accommodations that would be appropriate and useful for the student, but which neither the student nor the evaluator have requested.

The aforementioned guidelines are provided so that Disability Services can respond appropriately to the individual needs of the student. Disability Services reserves the right to determine eligibility for services based on the quality of the submitted documentation. Documentation may need to be updated or augmented in order to be reviewed more fully. Students who submit documentation that does not meet the guidelines will be required to send an updated evaluation before being considered for services. Disability Services reserves the right to determine eligibility for services based on the quality of the submitted documentation.

Please note that in reviewing the specific accommodation requested by the student or recommended by the physician/evaluator, Disability Services may find that while a recommendation is clinically supported, it is not the most appropriate accommodation given the requirements of a particular student’s academic program. In addition, Disability Services may also propose clinically supported accommodations that would be appropriate and useful for the student, but which neither the student nor the evaluator have requested.

All documentation is confidential