

OFFICE OF DISABILITY SERVICES

MOBILITY AND CHRONIC HEALTH DOCUMENTATION GUIDELINES

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 ensuring that the documentation is complete and appropriate:

1. Indiana University Southeast recognizes that “mobility disability” and “chronic health disability” are generic terms that can refer to a variety of conditions of short or long duration. The documentation must contain information regarding four important areas:

- a) Evaluator qualifications
- b) Recency of documentation
- c) Comprehensiveness of the documentation to support the diagnosis of a mobility or chronic health disability, including evidence to establish the current functional limitation(s) of the condition supporting the need for accommodations
- d) Multiple diagnoses

2. A qualified professional must conduct the evaluation: **qualified evaluators are defined as those licensed individuals trained to diagnose mobility and/or chronic health disabilities or who may serve as members of a diagnostic team.** Diagnoses of physical disabilities documented by family members will not be accepted because of professional and ethical considerations even when the family members are otherwise qualified by virtue of training and licensure or certification. Finally, the name, title and credentials of the qualified professional writing the report should be included. Information about licensure or certification, including the area of specialization, employment, and the state in which the individual practices, should also be clearly stated in the documentation. All reports should be in English, typed on professional letterhead, dated and signed.

3. Although some individuals have long-standing or permanent diagnoses, because of the changing manifestations of many mobility and chronic health disabilities, it is essential to provide recent and appropriate documentation from a qualified evaluator that is relevant to the specific educational environment. Since reasonable accommodations are based upon the current impact of the disability, the documentation must address the individual’s current level of functioning and the need for accommodations. If the diagnostic report is more than six months old, a recent letter completed by the diagnosing professional must be submitted with the diagnostic report.

4. Documentation necessary to support the diagnosis must be comprehensive. In most cases, documentation should be based on a comprehensive diagnostic/clinical

evaluation that adheres to the guidelines outlined in this document. In addition to a history of presenting symptoms, date of onset, duration and severity of the disorder, and relevant developmental and historical data, the diagnostic report should include the following components:

a) a specific diagnosis. Clinicians are encouraged to cite the specific objective measures used to help substantiate diagnoses. The evaluator should use definitive language in the diagnosis of a mobility or chronic health disability, avoiding such speculative language as “suggest,” “has problems with,” or “could have problems.”

b) a description of current functional limitation in the academic and employment environments, as well as across other settings. The description should include medical information describing the degree to which the current functional limitations restrict the condition, manner, or duration under the student can perform a major life activity.

c) relevant information regarding any medications that may impact the student. Given that many individuals benefit from prescribed medication and therapies, a positive response to medication in and of itself does not confirm a diagnosis, nor does the use of medication in and of itself either support or negate the need for accommodations.

d) relevant information regarding current treatment for this or any other conditions.

e) evidence that alternative etiologies or explanations have been considered in a differential diagnosis and the clinician must describe the degree of impact of the disorder on a specific major life activity, as well as the degree of impact on the individual. A link must be established between the requested accommodations and the functional limitations of the individual that are pertinent to the anticipated education setting.

5. Multiple diagnoses may require a variety of accommodations beyond those typically associated with only a single diagnosis, and therefore the documentation must adhere to Indiana University Southeast policy statements pertaining to the documentation of these specific conditions.

The aforementioned guidelines are provided so that Disability Services can respond appropriately to the individual needs of the student. Note that a diagnosis in and of itself does not automatically warrant approval of requested accommodation. 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