Duke University
Student Disability Access Office (SDAO)
Documentation Guidelines for Psychological Disorders
(including Autism Spectrum Disorders)

Duke University is committed to providing educational opportunities to qualified students with disabilities for purposes of Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990 and the ADA Amendments Act of 2008. In order to establish that an individual is covered under these laws, students must submit current documentation (i.e., psychological/diagnostic reports, records and information) confirming that a disability substantially limits one or more major life activities as compared to the average person in the general population. Accommodations are not granted on the basis of a diagnosis; they must be tied to current functional impairment(s). The diagnosis of a disorder/impairment alone does not automatically qualify an individual for accommodations under the federal laws.

The following guidelines are designed to provide students and professional diagnosticians with a common understanding and knowledge base of the components of documentation which are necessary to validate the existence of a psychological disorder, its impact on the individual’s educational performance, and accommodation(s) that are necessary in the post-secondary setting.

Documentation should include:

I. Qualifications of the Evaluator/Diagnostician

II. Current and Age Appropriate Evaluation Data & Clinical Summary/Report

III. Rationale and Justification for Requested Accommodations

IV. Confidentiality

I. Qualifications of the Evaluator/Diagnostician

The professional conducting the evaluation and making the diagnosis must be qualified to make the diagnosis and recommend appropriate accommodations. Professionals typically qualified to make this diagnosis include psychologists, neuro-psychologists, psychiatrists, and other doctors trained in psychology/psychiatry. A clinical team approach to diagnosis may also be appropriate. The documentation must include the name, title, and professional credentials of the evaluator, including information about licensure and/or specialization.

II. Current and Age Appropriate Evaluation Data & Clinical Summary/Report

Due to the changing nature of psychiatric disorders, it is essential that a student provide current and appropriate documentation from a qualified evaluator. Since reasonable accommodations are based upon the current impact of the disorder, the documentation must address the individual’s current level of functioning and the need for accommodations. On a case-by-case basis, a student may be asked to also submit updated information from a qualified professional on a semester-by-semester or yearly basis.
The report or clinical summary should provide and indicate as to what major life activity is impacted by the psychiatric disability. A description of the functional limitation(s) that substantially limits and impacts the student’s academic performance should also be included. The documentation must include a coded diagnosis per the Diagnostic and Statistical Manual IV-TR (DSM-IV-TR) or the DSM-V, a description of any evaluation methods, tests and procedures used, along with a clinical narrative based upon observations and history of presenting symptoms. Including current medication regimens and side effects in the summary is particularly important since psychotropic medications may have a substantial impact on concentration and cognitive functioning.

If the documentation is inadequate in scope or content, or is not relevant to the individual’s current functional impairments and need for accommodations, SDAO may require the submission of additional information. Copies of Individual Educational Plans (IEP) and 504 Accommodation Plans are useful, but may not be substituted in lieu of the above documentation.

**III. Rationale and Justification for Each Requested Accommodation**

Accommodation requests are not granted on the basis of a diagnostic label: they must be tied to history and current functional impairment(s). A psychiatric diagnosis alone will not necessarily establish disability status or warrant accommodations under the ADA. To be considered, accommodations must be necessary, reasonable and appropriate. In making recommended accommodations, it is useful if the evaluator establishes a clear link between the request and the student’s functional limitations. Please note that the provision of a past accommodation in another setting does not ensure that the requested accommodation will be implemented at Duke University; however, having such information is useful to SDAO and will be seriously considered.

It is also important to include information regarding any prior accommodations or auxiliary aids; including the specific criteria used to grant prior accommodations/auxiliary aids, the conditions under which the accommodations/auxiliary aids were used and whether or not they were effective. Given that many individuals may perceive that they might benefit from extended time in testing situations, evaluators must provide specific rationales and justification for recommended testing accommodations.

**IV. Confidentiality**

All information obtained in diagnostic and medical records will be maintained and used in accordance with applicable confidentiality requirements.

**Submitting Documentation and Questions**

Documentation should be mailed to the attention of the Student Disability Access Office, Box 90142, Duke University, Durham, NC 27708 or faxed to (919) 668-3977. Questions should be directed to (919) 668-1267.

*The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. “Genetic information,” as defined by GINA, includes an individual’s family medical history, the results of an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.*