



Duke University/Health System

Disability Management Systems/Student Disability Access Office

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Documentation Guidelines for Learning Disabilities

Duke University/Health System is committed to providing equal opportunities to qualified employees 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, employees must submit full and current documentation (i.e., visual assessment, records and information) confirming that their diagnosed disability substantially limits one or more major life activities as compared to the average person in the general population.

The following guidelines are designed to provide employees and medical providers with a common understanding and knowledge base of the components of documentation which are necessary to validate the existence of Learning Disabilities, its impact on the individual's employment performance, and accommodation(s) that are necessary in the workplace.

These guidelines contain information regarding:

I. Qualifications of the Evaluator

II. Current and Age Appropriate Evaluation Data

III. Rationale & Justification for Each Requested Accommodation

IV. Confidentiality

I. Qualifications of the Evaluator

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.

Diagnoses of a Learning Disorder documented by family members will not be accepted even when the family members are otherwise qualified by virtue of training and licensure/ certification. All reports should be in English, typed or printed on professional letterhead, dated, and signed.

II. Current and Age Appropriate Evaluation Data is Required

Since reasonable accommodations are based upon the assessment of the current impact of the disorder on the essential functions of a particular position; evaluation/diagnostic reports must address the individual's current level of functioning and the need for accommodations. If the documentation is inadequate in scope or content, or is not relevant to the individual's current functional impairments and need for accommodations, additional information may be required. It is the employee's responsibility to obtain additional documentation, as necessary.

III. Rationale & Justification for Each Requested Accommodation

Accommodations are not granted on the basis of a diagnostic label: they must be tied to the individual's specific history and current functional impairment. The diagnostic report should include specific recommendations for accommodations that flow logically from the history and current functional impairment. A link must be established between the requested accommodations and the current functional limitations of the individual that are pertinent to the anticipated workplace environment.

IV. Confidentiality

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

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.

