



## Duke University/Health System

Disability Management Systems/Student Disability Access Office

402 Oregon Street, Suite 102, Box 90142, Telephone: (919) 668-1267, Fax: (919) 668-3977, TTY: (919) 668-1329 <http://www.access.duke.edu>

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### Documentation Guidelines for Psychological Disorders

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 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 employees 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 employment performance, and accommodation(s) that are necessary in the workplace.

Documentation should include:

- I. Qualifications of the Evaluator/Diagnostician
- II. Currency of Evaluation
- 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. Currency of Evaluation**

Due to the changing nature of psychiatric disorders, it is essential that an employee 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, an employee may be asked to also submit updated information from a qualified professional when necessary.

### **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 link must be established between the requested accommodations and the current functional limitations of the individual that are pertinent to the anticipated workplace environment.

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.

### **IV. Confidentiality**

All information obtained in diagnostic and medical records 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.*