Documentation Criteria for Permanent Accommodations Attention-Deficit/Hyperactivity Disorder (AD/HD)

In order to establish disability status and eligibility for disability services, institutions of the University System of Georgia require documentation from a qualified evaluator that attests to the presence of a disabling condition as defined by the ADA and demonstrates substantial limitations impacting performance in the academic environment when compared to most people in the general population.

AD/HD is a persistent pattern of inattention and/or hyperactivity-impulsivity that is more frequently displayed and more severe than is typically observed in individuals at a comparable level of development. By definition, the disorder is developmental in nature, and therefore, diagnosis requires the manifestation of several symptoms prior to age 12 years. Furthermore, a diagnosis of AD/HD is not sufficient, in and of itself, to determine appropriate accommodations. Therefore, objective data provided in a comprehensive assessment of cognitive processing and academic functioning may be required to establish the nature and severity of the student's functional limitations. Such data may include, but are not limited to, the following: rating scale information, performance on continuous performance tasks, cognitive processing test results, and/or the results of achievement tests.

Specific documentation guidelines for AD/HD include the following:

- Evaluators must be licensed qualified professionals whose training and credentials are consistent with expertise in the disability for which they provide documentation.
- Evaluators may not be friends or family members of the student.
- A diagnostic statement based on the most current Diagnostic and Statistical Manual of Mental Disorders (DSM) and/or International Classification of Diseases (ICD) should be included.
- Evaluators should demonstrate how the assessment results meet diagnostic criteria.
- The progression of the condition should be detailed if its impact on the student's functioning is expected to change over time.
- Because diagnostic methodologies vary by disorder, further guidance for meeting this requirement can be found in the specific guidelines.
- The substantial limitation in a major life activity should be described.
- Quantitative and qualitative information should be used to demonstrate that the difficulties are substantially limiting when compared to most people in the general population.
- Evidence that the difficulties are substantially limiting to the student in the academic environment should be presented.
- Any accommodation recommendations made must be supported by a rationale that explains the necessity based on the student's measured impairments and current substantial limitations.
- Documentation of accommodations approved in the past is encouraged but does not guarantee approval at the postsecondary level.
- Identifying information includes the names, signatures, titles, identifying credentials (e.g., license numbers), and contact information of evaluating professionals.
- Dates of evaluations must be included.
- Documentation should reflect data collected within the past three years at the time of request for services.

Adapted from USG Policy for Disability Documentation:

- Evidence of the following diagnostic criteria must be included in the documentation:
 - Some evidence, beyond simple self-report, of clinically significant inattention and/or hyperactivity-impulsivity symptoms prior to the age of 12 (in accordance with the DSM).
 Possible data sources for evidence of early symptoms include the following: parent/guardian report, medical reports, school records, and past evaluations.
 - Evidence of current clinically significant symptoms of either inattention and/or hyperactivity-impulsivity must be documented using appropriate standardized rating scales or norm-referenced measures of cognitive/executive functioning that provide comparisons to similarly aged individuals. However, in some cases, a detailed written statement from a qualified evaluator who has sufficient experience with the student and the student's symptom history may be sufficient.
 - Symptom presence must be assessed using student self-report and corroborated by an independent informant who has been able to observe the student's recent functioning.
 - Current clinically significant symptoms must be present in at least two settings and interfere with social, academic, or occupational functioning.
- Verifiable evidence that symptoms are associated with significant functional impairment in the academic setting. Suggested sources for evidence of academic functional impairment include the results of a comprehensive psycho-educational evaluation, school records, and/or a comprehensive clinical interview that is described in a written statement by the evaluator.