OXY Occidental College

Guidelines for Documenting Attention Deficit/Hyperactivity Disorder (ADHD)

1.) A Qualified Evaluator. Professionals conducting assessments rendering the diagnosis of ADHD and making recommendations for appropriate accommodations must be qualified to do so (e.g., psychiatrist, M.D., licensed psychologist, or neuropsychologist). The documentation must meet the following criteria:

- include evaluator's name, title, professional credentials, license and/or certification number,
- be presented on the professional's letterhead, typed, dated, signed, and legible,
- the evaluator may not be a family member.

2.) Current Documentation. The impact of ADHD on an individual can change over time. To determine the most appropriate accommodations, ADHD documentation should be current – preferably within the past five years.

3.) Comprehensive Documentation. ADHD is complex, affecting each person differently. ADHD documentation must be thorough, giving a full picture of the individual, not simply a diagnosis. A complete psychoeducational or neuropsychological report, including the components listed below, is preferred:

- Thorough discussion of:
  - historical information showing evidence of ADHD in childhood/adolescence,
  - relevant psychosocial, medical, and medication history,
  - academic history including a history of ADHD-related accommodation, and
  - relevant psychosocial, medical, and medication history,
  - evidence of current impairment, and a statement of presenting problem(s).
- We recommend diagnostic instruments to assess for ADHD and closely related conditions. These would include measures of
  - aptitude and achievement,
  - memory and processing speed,
  - continuous performance,
  - attention or tracking tests, and
  - diagnostic checklists and rating scales to assess psychological and learning disorders

    *Test scores or self-reported ratings alone may not be used as a sole measure for the diagnostic decision regarding ADHD
- A clear diagnosis of ADHD must be rendered, including:
  - **Clearly** stated ADHD diagnosis and subtype, with diagnostic code,
  - DSM criteria, including symptomatology, on which the diagnosis is based,
  - impact in two or more settings (e.g. school, work, or home),
  - evidence of the ruling out of alternative explanations and co-morbid diagnoses,
  - CANNOT INCLUDE wording such as "seems to indicate" or "suggests,"
  - CANNOT solely refer to ADHD as merely "Attention problems" or "Attention issues,"
- Describe current treatments used to ameliorate the impact of ADHD
- Evidence of current functional limitations in an academic environment - the ways that the diagnosed ADHD currently substantially limits the student in the major life activity of learning. The report must establish that the symptoms of ADHD cause significant

impairment in learning and judgments of severity should be based on comparison to the general population. For instance:
    - How does this student's disability impair his/her ability to learn?
    - Describe the current functional limitations pertaining to an educational setting that are presumably a direct result of problems with attention.
    - Elaborate on how it has interfered with educational achievement
- Appropriate and specific recommendations for an academic environment including:
    - detailed explanation as to why each accommodation is recommended
    - correlation to functional limitations previously described.

4.) Supporting Documentation. While required, the report of the qualified evaluator is by no means the only documentation we can use to better understand and accommodate the student with ADHD. Other helpful documents are: records of accommodation on standardized tests such as SAT or ACT, high school 504 plans or IEP's.