



## MOBILITY AND CHRONIC HEALTH DISABILITIES DOCUMENTATION GUIDELINES

Students requesting accommodations may be required to submit documentation to verify eligibility under the ADA of 1990 and Section 504 of the Federal Rehabilitation Act of 1973. Appropriate documentation of the disability allows the Office of Disability Services (ODS) to determine the student's eligibility for accommodation and the appropriate academic accommodations. **PLEASE NOTE** that students should not delay meeting with ODS out of concern for not having the correct (or any) documentation. If needed, the Coordinator can discuss with the student any specific documentation needs during the Welcome Meeting. **Our priority is on meeting with students and beginning the accommodations process for them as soon as possible.** Provisional accommodations may be provided to allow students time to procure any needed documentation.

The following guidelines are provided in the interest of assuring that the documentation validates the presence of a disability, demonstrates an impact of the disability on learning, and supports the request for accommodations and services.

1. The University of Tennessee recognizes that "mobility disability" and "chronic health disability" are generic terms that can refer to a variety of conditions of short or long duration. Documentation should contain information regarding four important areas:
  - a) Evaluator qualifications
  - b) Date of original diagnosis and date of most re-evaluation (Please note that documentation for individuals with chronic health disabilities must be updated on a yearly basis.)
  - c) Comprehensiveness of the documentation to support the diagnosis of a mobility or chronic health disability, including evidence to establish the current functional limitation(s) of the condition supporting the need for accommodations
  - d) Multiple diagnoses, if applicable
2. A qualified professional must conduct the evaluation: qualified evaluators are defined as those licensed individuals who are qualified to evaluate and diagnose mobility and/or chronic health disabilities or who may serve as members of a diagnostic team. Diagnoses of physical disabilities documented by family members will not be accepted because of professional and ethical considerations even when the family members are otherwise qualified by virtue of training and licensure or certification. Finally, the name, title and credentials of the qualified professional writing the report should be included. Information about licensure or certification, including the area of specialization, employment, and the state in which the individual practices should also be clearly stated in the documentation. All reports should be in

English, typed on professional letterhead, dated and signed.

3. Although some individuals have long-standing or permanent diagnoses, because of the changing manifestations of many mobility and chronic health disabilities, it is essential to provide recent and appropriate documentation from a qualified evaluator that is relevant to the specific educational environment. Since accommodations are based upon the current impact of the disability, the documentation must address the individual's current level of functioning and the need for accommodations. If the diagnostic report is more than six months old, a recent letter completed by the diagnosing professional must be submitted with the diagnostic report.
4. Documentation necessary to support the diagnosis must be comprehensive. In most cases, documentation should be based on a comprehensive diagnostic/clinical evaluation that adheres to the guidelines outlined in this document. In addition to a history of presenting symptoms, date of onset, duration and severity of the disorder, and relevant developmental and historical data, the diagnostic report should include the following components:
  - a) A specific diagnosis. Clinicians are encouraged to cite the specific objective measures used to help substantiate diagnoses. The evaluator should use definitive language in the diagnosis of a mobility or chronic health disability, avoiding such speculative language as "suggest," "has problems with," or "could have problems."
  - b) A description of current functional limitation in the academic and employment environments, as well as across other settings. The description should include medical information describing the degree to which the current functional limitations restrict the condition, manner, or duration under the student can perform a major life activity.
  - c) Relevant information regarding any medications that may impact the student. Given that many individuals benefit from prescribed medication and therapies, a positive response to medication in and of itself does not confirm a diagnosis, nor does the use of medication in and of itself either support or negate the need for accommodations.
  - d) Relevant information regarding current treatment for this or any other conditions.
  - e) Evidence that alternative etiologies or explanations have been considered in a differential diagnosis and the clinician must describe the degree of impact of the disorder on a specific major life activity, as well as the degree of impact on the individual. A link must be established between the requested accommodations and the functional limitations of the individual that are pertinent to the anticipated education setting.
5. Multiple diagnoses may require a variety of accommodations beyond those typically associated with only a single diagnosis, and therefore the documentation must adhere to the UT policy. For example, when accommodations are requested based on multiple diagnoses, documentation should also comply with The University of Tennessee policy statements pertaining to the documentation of these specific conditions.

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Please note that in reviewing the specific accommodation requested by the student or recommended by the physician/evaluator, ODS may find that while a recommendation is clinically supported, it is not the most appropriate accommodation given the requirements of a particular student's academic program. In addition, ODS may also propose clinically supported accommodations that would be appropriate and useful for the student, but which neither the student nor the evaluator have requested.

The aforementioned guidelines are provided so that Disability Services can respond appropriately to the individual needs of the student. Disability Services reserves the right to determine eligibility for services based on the quality of the submitted documentation. Documentation may need to be updated or augmented in order to be reviewed more fully.

**ALL DOCUMENTATION IS CONFIDENTIAL**

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