

DOCUMENTATION OF PSYCHOLOGICAL DISABILITY

Students requesting services or accommodations at NC State University are required to provide current documentation. Documentation standards to determine legal eligibility are more stringent than for usual clinical practice. Eligibility is based upon documented clinical data not simply on self-report or evidence of a diagnosis.

The Americans with Disabilities Act defines a person with a disability as one who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment or is regarded as having such an impairment.

As the diagnosing professional, please fully complete all sections of this form and narrative. Additional reports or information can be attached whenever appropriate.

Please note: All information that you provide may be shared with this student unless clearly marked otherwise on this form. Thank you for your assistance.

Disability Services Office
Student Health Center Building
2815 Cates Ave., Suite 1900
Campus Box 7509
Raleigh, NC 27695-7509

919.515.7653 (voice)
919.515.8830 (TDD)
919.513.2840 (fax)

www.ncsu.edu/dso

TO BE COMPLETED BY THE DIAGNOSTICIAN

Student Name: \_\_\_\_\_

I. Does this student have a mental impairment?

DIAGNOSIS DSM-IV multi-axial diagnosis for this student

Axis I: \_\_\_\_\_
Axis II: \_\_\_\_\_
Axis III: \_\_\_\_\_
Axis IV: \_\_\_\_\_
Axis V (GAF score): \_\_\_\_\_

Current Average over the last year

Date of above diagnosis: \_\_\_\_\_ Date student was last seen: \_\_\_\_\_
MM/DD/YYYY MM/DD/YYYY

Is impairment persistent and long term? \_\_\_\_\_
If temporary, what is the expected duration? \_\_\_\_\_

TREATMENT

How often do you provide treatment? \_\_\_\_\_
Other Providers and frequency? \_\_\_\_\_

Prescribed Medications

Student's Current Side Effects

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please continue on the other side



## METHODS OF ASSESSMENT

What methods were used to determine this person's functional limitations?

Structured or unstructured interviews with the student. Please, explain: \_\_\_\_\_

\_\_\_\_\_

Interviews with other persons. Please, explain: \_\_\_\_\_

\_\_\_\_\_

Behavioral observations. Please, explain: \_\_\_\_\_

\_\_\_\_\_

Developmental history. Please, explain: \_\_\_\_\_

\_\_\_\_\_

Educational history. Please, explain: \_\_\_\_\_

\_\_\_\_\_

Medical history. Please, explain: \_\_\_\_\_

\_\_\_\_\_

Neuro-psychological testing. (Attach results) Date(s) of testing: \_\_\_\_\_

\_\_\_\_\_

Psycho-educational testing. (Attach results) Date(s) of testing: \_\_\_\_\_

\_\_\_\_\_

Standardized or non-standardized rating scales. Please, explain: \_\_\_\_\_

\_\_\_\_\_

Other (Please specify): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please continue on other side**

## RECOMMENDED ACCOMMODATIONS

Which accommodations and/or services, if any, do you recommend? (This is for planning purposes only. If required, NC State University will determine the appropriate, reasonable accommodations.)

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## IV. WRITTEN NARRATIVE (An evaluation report that includes the information requested below can serve as the written narrative.)

A written narrative (signed, dated and on official letterhead) must be submitted with the "Documentation of Psychological Disability" form. This written report can be brief but must adequately support each accommodation recommended and must include:

1. Additional information about current difficulties and functional limitations in an educational setting;
2. Information about how medication and/or other corrective measures may correct the impairment. Please include whether or not accommodations will be needed when utilizing medication or other corrective measures;
3. Activities or situations that should be avoided or would present a current significant risk of serious injury or death for this student or others;
4. Whether this student is currently a danger to himself / herself or others (Explain);
5. A clear and convincing rationale for each requested accommodation based on the degree of impact of the impairment and the resulting functional limitations.

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Thank you for your help in providing this information so that we may begin providing services or accommodations as soon as possible.

Since DSO bases eligibility decisions on the documentation submitted by qualified diagnosticians, incomplete or missing information can prevent or delay necessary services and accommodations. This form and the required narrative must be completed and signed by the qualified professional who performed the evaluation and made the diagnosis.

**Please mail the signed original form and narrative. To avoid delay, also fax us a copy at 919-513-2840. Faxed forms and narratives must be followed by a mailed original copy.**

**PLEASE ATTACH YOUR BUSINESS CARD TO THE DOCUMENT OR ANOTHER FORM OF IDENTIFICATION FOR THE STUDENT FILE.**

Name \_\_\_\_\_

Title \_\_\_\_\_

Business Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_

Professional Credentials \_\_\_\_\_

License / Certification number \_\_\_\_\_

Area of Specialization \_\_\_\_\_

State / Province of Licensure / Certification \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Attach additional sheets if needed**

# **Documenting Psychiatric Disabilities - Guidelines for Documentation of Psychiatric Disabilities in Adolescents and Adults- Office of Disability Policy, Educational Testing Service**

## **Appendix B**

### **Assessing Adolescents and Adults with Psychological Disorders**

This appendix contains selected examples of tests and instruments that may be used to supplement the clinical interview and support the presence of functional limitations. All tests used should be current and have sufficient reliability, validity, and utility for the specific purposes for which they are being employed. All tests should also be normed on relevant populations, and the results should be reported in standard scores and/or percentile ranks. Tests that have built-in validity scales or indicators are preferred over those that do not.

**1. Rating scales:** Self-rater or interviewer-rated scales for categorizing and quantifying the nature of the impairment may be useful in conjunction with other data, but no single test or subtest should be used solely to substantiate a diagnosis.

Acceptable instruments include, but are not limited to:

- *Beck Anxiety Inventory*
- *Beck Depression Inventory-II*
- *Brief Psychiatric Rating Scale (BPRS)*
- *Burns Anxiety Inventory*
- *Burns Depression Inventory*
- *Children's Depression Inventory*
- *Hamilton Anxiety Rating Scale*
- *Hamilton Depression Rating Scale*
- *Inventory to Diagnose Depression*
- *Multidimensional Anxiety Scale for Children (MASC)*
- *Profile of Mood States (POMS)*
- *State-Trait Anxiety Inventory (STAI)*
- *Taylor Manifest Anxiety Scale*
- *Yale-Brown Obsessive-Compulsive Scale*

**2. Neuropsychological and psychoeducational testing:** Cognitive, achievement, and personality profiles may uncover attention or information-processing deficits, but no single test or subtest should be used solely to substantiate a diagnosis.

Acceptable instruments include, but are not limited to:

### **Aptitude/Cognitive Ability**

- *Kaufman Adolescent and Adult Intelligence Test*
- *Stanford-Binet, Fourth Edition*
- *Wechsler Adult Intelligence Scale-III (WAIS-III)*
- *Woodcock-Johnson-III - Tests of Cognitive Abilities*

## Academic Achievement

- *Scholastic Abilities Test for Adults (SATA)*
- *Stanford Test of Academic Skills (TASK)*
- *Wechsler Individual Achievement Test-II (WIAT-II) with reading rate*
- *Woodcock-Johnson-III - Tests of Achievement with fluency measures*

Specific achievement tests, such as

- *Nelson-Denny Reading Test for normal and extended time conditions*
- *Stanford Diagnostic Mathematics Test*
- *Stanford Diagnostic Reading Test*
- *Test of Written Language-3 (TOWL-3)*
- *Woodcock Reading Mastery Tests-Revised*

## Information Processing

- *California Verbal Learning Test-II*
- *Category Test*
- *Continuous Performance Test*
- *Detroit Tests of Learning Aptitude-Adult (DTLA-A)*
- *Detroit Tests of Learning Aptitude-3 (DTLA-3)*
- *Halstead-Reitan Neuropsychological Test Battery*
- *Rey-Osterrieth Complex Figure Test*
- *Stroop Interference Test*
- *Trail Making Test*
- *Wechsler Memory Scale III (WMS-III)*
- *Wisconsin Card Sorting Test*

Information from subtests on the *WAIS-III* or *Woodcock-Johnson-III - Tests of Cognitive Abilities*, as well as other relevant instruments, may be useful when interpreted within the context of other diagnostic information.

## 3. Personality Tests:

Acceptable instruments may include, but are not limited to:

- *Millon Adolescent Personality Inventory (MAPI)*
- *Millon Clinical Multiaxial Personality Inventory-III (MCMI-III)*
- *Minnesota Multiphasic Personality Inventory-Adolescent (MMPI-A)*
- *Minnesota Multiphasic Personality Inventory-2 (MMPI-2)*
- *NEO Personality Inventory-Revised (NEO-PI-R)*
- *Personality Assessment Inventory (PAI)*
- *Sixteen Personality Factor Questionnaire (16PF)*
- *Thematic Apperception Test (TAT)*

**Taken from: Documenting Psychiatric Disabilities, Guidelines for Documentation of Psychiatric Disabilities in Adolescents and Adults, July 2001, Office of Disability Policy, Educational Testing Service, Princeton, NJ 08541. Complete document can be found at:**  
<http://www.ets.org/portal/site/ets/menuitem.c988ba0e5dd572bada20bc47c3921509/?vgnnextoid=503350d0f2055010VgnVCM10000022f95190RCRD&vgnnextchannel=fbc7be3a864f4010VgnVCM10000022f95190RCRD>