



DOCUMENTATION GUIDELINES: TBI/ABI (Traumatic or Acquired Brain Injury Disability)

Students who are requesting services from Disability Support Services at The Catholic University of America are required to submit documentation under the Americans with Disabilities Act Amendments (ADAAA) and Section 504 of the Rehabilitation Act of 1973. Individuals with disabilities are protected from discrimination and may be entitled to reasonable accommodations and the right to equal access to programs and services. A diagnosis of a disability alone does not automatically qualify an individual for accommodations under the ADAAA. To establish the need for a reasonable accommodation, the documentation must indicate the disability substantially limits one or more major life activities, and supports the request for services, accommodations, academic adjustments, and/or auxiliary aids.

This document provides guidelines necessary to establish the impact of the disability on the individual's educational performance and participation in other University programs and activities, and to validate the need for accommodations. In instances where there may be multiple diagnoses evaluators should consult the appropriate companion guidelines.

Submitted information must be current and comprehensive in order to avoid unnecessary delays in granting the accommodations. Students may be asked to provide updated comprehensive information if their condition is potentially changeable and/or previous documentation doesn't include sufficient relevant information.

1. A specific statement of the injury and the probable site of lesion must be stated within the documentation submitted. If another diagnosis is applicable, it should also be stated. A statement should be included indicating the current status of the injury and any relevance to the institutional setting.
2. The Office of Disability Support Services encourages entering students to complete a full evaluation just prior to attending The Catholic University of America. If this is not possible, we encourage the evaluation to have been completed within the past three years for students just graduating high school.
3. It is preferred that individuals who are 17 years of age or older be tested using diagnostic instruments normed for adults. Documentation that is more than three years old will be considered individually. All Documentation will be handled on a case-by-case basis and students may be required to submit more recent documentation.
4. The evaluation must be performed by a professional who is knowledgeable about brain injuries and qualified to make appropriate recommendations. This would include a physician, neurologist, licensed clinical and rehabilitation psychologists, neuropsychologists, and psychiatrists.
5. A summary of cognitive and achievement measures used and evaluation results including standardized scores or percentiles used to make the diagnosis. The assessment, and any resulting diagnosis, should consist of and be based on a comprehensive assessment battery that does not rely on any one test or subtest. Evidence of a substantial limitation to learning or other major life activity must be provided. Both aptitude and academic achievement must be evaluated and included in the test report. The following tests are considered acceptable:
 - **Aptitude:** WAIS-III; Stanford-Binet IV; Woodcock-Johnson Psychoeducational Battery Revised: Test of Cognitive Ability
 - **Academic Achievement:** Woodcock-Johnson Psychoeducational Battery -Revised: Test of Achievement; Wechsler Individual Achievement Test (WIAT); Stanford Test of Academic Skills (TASK); Scholastic Abilities Test for Adults (SATA) *(The Wide Range Achievement Test-3 (WRAT-3) is not a comprehensive measure of achievement and therefore should not be used as a sole measure of achievement.)*
6. Specific cognitive processing strengths, weaknesses, and deficits should be discussed. Clear documentation of deficit areas is necessary in order for the college to provide appropriate, reasonable accommodations. The documentation should discuss the following processing areas:
 - Visual spatial abilities
 - Memory (auditory and visual; short-term and long term)
 - Fine Motor / dexterity (speed/ sequence of motor patterns)
 - Executive functions (verbal and nonverbal reasoning). It is also helpful to know about the student's cognitive flexibility and automaticity with cognitive tasks.
 - Selective attention / perception (auditory and visual)
7. A comprehensive evaluation by a speech pathologist to determine oral language skills should be included. Formal instruments or an informal analysis of a language sample are appropriate.

8. Social-emotional status should be assessed and discussed. Formal assessment instruments and / or clinical interview are appropriate. If applicable, a mental health diagnosis should be clearly stated, using the DSM-IV.
9. A statement of functional impact or limitations of the disability on learning or other major life activity and the degree to which it impacts the individual in the learning context for which accommodations are being requested.
10. Medical information relating to the student's needs to include the impact of medication on the student's ability to meet the demands of the postsecondary environment.
11. The documentation must include the following information:
 - Names of the assessment instruments used
 - Quantitative and qualitative information which supports the diagnosis
 - The areas of educational impact and the severity of the condition
 - Recommendations for prescriptive treatments
 - Notation of medications prescribed, if any, and potential impact on learning
 - Additional observations or recommendations which could assist us in adequately serving the student
 - The names, titles, addresses, and phone numbers of the evaluator(s), as well as date(s) of testing

Please note that in reviewing the specific accommodation requested by the student or recommended by the physician/evaluator, Disability Support Services 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, Disability Support Services 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 Support Services can respond appropriately to the individual needs of the student. Disability Support Services reserves the right to determine eligibility for services based on the quality of the submitted documentation. Documentation may need to be updated or supplemented in order to be considered complete. **Students who submit partial or incomplete documentation that does not meet the guidelines will not be eligible for services or granted accommodations.**

Send all documentation to:

Disability Support Services
National University of Health Sciences
200 E. Roosevelt Road
Lombard, IL 60148
630-889-6655 Fax