Guidelines for Documenting Physical Disability or Medical Condition

hesitate to contact SDS at (972) 752056 if you have any questions. A physician, or other medical specialist with experience and expertise in the area related to the student's disability, should make the diagnosis Conditions may include, but are not limited to, mobility impairments, multiple sclerosis, cerebral palsy, chemical sensitivities, spinal cord injuries, cancer, AIDS, muscular dystrophy, spina bifida, diabetes, asthma, etc. The diagnostician should an fatroity member of the student. Documentation should include:

- 1. Diagnosis: A clear statement of the physical disability or medical condition
 - a. Approximate onset of symptoms
 - b. Date of last clinical contact: The assessment must be cultreat useconditions may phianegie rather hance commodilative scalar interpretation of the content of turn of the content of turn of the content of the conte

2. Evaluation

- a. Aissepted is the procedures and evaluation instruments that have been used to make the
- b. Narratve of evaluation results including standardized scores, if applicable.
- c. Present symptoms that meet the criteria for the diagnosis.
- d. Current treatment.
- e. Severity of symptoms.
- Prognosis of disorder.

- 3. Functional Limitations: Should be determined WITHOUT consideration of mitigating measures (i.e. medication, etdf) condition is episodic in nature, level of functioning should be assessed based on active phase of symptoms.
 - a. Impact on major life activities.
 - b. Behavioral manifestations of the disability, in the learning context for which the accommodations are being requested.
 - c. Any additional limitations that fall in the substantial range.
 - d. Spa-Tabl/Toto 5 six deintrical and (On-14) 122((s)) 12((s)) 12((s))