

# Texas Christian University

Disabilities Services  
Center for Academic Services  
Sadler Hall, Room 1010  
TCU Box 297710  
Fort Worth, TX 76129  
Telephone 817-257-6567  
Fax 817-257-5358  
Web <http://www.acs.tcu.edu/disability>

## Documentation Guidelines for TCU Students with Disabilities

### Mental Health Disabilities

Mental Health Disabilities include, but are not limited to, mood disorders, anxiety disorders, eating disorders, and psychotic disorders.

- The University requires comprehensive documentation of the student's disability in order to fully evaluate accommodation requests and to determine eligibility for services.
- Documentation should be presented to the Student Disabilities Services Office. It shall be reviewed by appropriate University professional(s) to verify the existence of a disability and to determine the need for appropriate accommodations.
- Information concerning a student's disability is treated in a confidential manner in accordance with University policies as well as applicable state and federal laws.
- A list of appropriate mental health evaluations is given in the **APPENDIX**. (This list is not meant to be comprehensive and additional evaluation instruments may be considered. Please call our office if you have questions.)

Documentation requirements for **Mental Health Disability** include, but are not limited to, the following:

- A. Current Documentation** – Documentation must be current, within the past **6-12** months; (determination will be made on a case-by-case basis).
- B. Qualifications of Examiner**--Documentation must be completed by a licensed psychiatrist, psychologist, or other appropriately licensed mental health practitioner. The examiner must be trained and qualified to make a diagnosis based on the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V) and/or the International Classification of Diseases Manual Tenth Revision (ICD-10). Comprehensive training and direct experience with an adolescent and adult population is essential.
- C. Report**--The information must be in a typewritten report on professional letterhead that bears the evaluator's name, license number, professional credentials, and original signature. Additionally, include the evaluator's business card. **Please mail the report directly to the Student Disabilities Services office.**

- D. **Diagnosis** – A complete *DSM-V* or ICD-10 diagnosis must be provided with an accompanying description of the specific symptoms that the student experiences. This diagnosis should be based upon a comprehensive clinical interview and/or psychological testing (when testing is clinically appropriate). A comprehensive clinical interview should meet mental health service provider standards of care in length (50 min.) and focus (complete developmental, familial, psychological, medical history, and/or mental status exam).
- E. **Impact on Academic Functioning** – A complete description of the impact that the student’s psychological symptoms have on his/her academic functioning must be provided. Examples of areas impacted by the mental health disorder may include study skills, classroom behavior, test taking, organizing, memory, concentration, processing speed, and research. See Appendix for examples of tests and instruments used to supplement the presence of functional limitations.
- F. **Recommendations for Academic Accommodations** – Recommendations for academic accommodations must be based upon both D and E above: diagnostic information and the mental health disorder’s impact upon student functioning.
- G. **In summary, your letter of disability documentation should provide responses to each of the following questions:**
1. Does the student have a diagnosable mental health disorder and/or a certification of mental health disability? If so, what is the specific multi-axis *DSM-V* classification? Please code on all 5 axes. Or specific ICD-10 code?
  2. What assessment or evaluation procedures were used to make the diagnosis?
  3. Is there historical data that is pertinent to the mental health disability (i.e.: familial or developmental)? Please explain.
  4. What major symptoms of the disorder does the student currently manifest and what is the level of severity of each symptom?
  5. If medications are currently prescribed for any diagnosis, does the individual experience any substantial side effects? State type of medication, dosage, any adverse side effects, and the medication’s current effectiveness. Does the student need accommodations to address substantial side effects? Please explain.
  6. What are the current functional limitations on activities of daily living imposed by this disorder?
  7. What is the current prognosis? Is the condition stable, chronic, progressive, or relapsing-remitting?

8. When did you last treat this individual? When is your next scheduled appointment? Have you treated this individual on a regular basis? For how long have you been treating this individual?
9. How does the diagnosis impact the individual in an educational setting (current functional limitations)?
10. What recommendations do you have regarding accommodations and what is your rationale for each of the recommended accommodations?
11. Are there any indications that this student may have another diagnosis? Please describe pertinent characteristics and give an explanation for your reason to suspect this secondary diagnosis. Has the individual been referred for other treatment that may impact on current functional limitations?

## APPENDIX

### Assessments for Mental Health Disorders in Adolescents and Adults

(From ETS Guidelines)

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 be normed on relevant populations and results reported in standard scores and 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, the following:

*Beck Anxiety Inventory*

*Beck Depression Inventory-II*

*Brief Psychiatric Rating Scale (BPRS) Expanded Version 4.0*

*Burns Anxiety Inventory*

*Burns Depression Inventory*

*Hamilton Anxiety Rating Scale*

*Hamilton Depression Rating Scale*

*Inventory to Diagnose Depression*

*Profile of Mood States-2 (POMS-2)*

*State-Trait Anxiety Inventory (STAI)*

*System Checklist-90-Revised*

*Taylor Manifest Anxiety Scale*

*Yale-Brown Obsessive-Compulsive Scale*

**2. Neuropsychological and psychoeducational testing:** Aptitude/cognitive ability, 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, the following:

**Aptitude/Cognitive Ability**

*Kaufman Adolescent and Adult Intelligence Test*

*Stanford-Binet, Fifth Edition*

*Wechsler Adult Intelligence Scale-IV (WAIS-IV)*

*Woodcock-Johnson-IV- Tests of Cognitive Abilities (WJ-IV)*

**Academic Achievement\***

*Scholastic Abilities Test for Adults (SATA)*

*Stanford Test of Academic Skills (TASK)*

*Wechsler Individual Achievement Test-III (WIAT-III) with reading rate*

*Woodcock-Johnson-IV- Tests of Achievement*

Supplemental tests:

*Nelson-Denny Reading Test (with standard and extended time)*

*Stanford Diagnostic Mathematics Test, 4<sup>th</sup> Edition*

*Test of Written Language-4 (TOWL-4)*

*Woodcock Reading Mastery Tests-Third Edition*

**Information Processing**

*California Verbal Learning Test-II*

*Category Test*

*Comprehensive Test of Phonological Processing (CTOPP)*

*Conners' Continuous Performance Test Version 5 (CPT-II Version 5)*

*Delis Kaplan*

*Detroit Tests of Learning Aptitude-Adult (DTLA-A)*

*Detroit Tests of Learning Aptitude-4 (DTLA-4)*

*Halstead-Reitan Neuropsychological Test Battery*

*Rey-Osterrieth Complex Figure Test*

*Stroop Interference Test*

*Test of Memory Malingering (TOMM)*

*Trail Making Test*

*Wechsler Memory Scale IV (WMS-IV)*

*Wisconsin Card Sorting Test*

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

### **3. Personality tests (may include, but are not limited to, the following):**

*\*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)*

*Personality Diagnostic Questionnaire-4 (PDQ)*

*Sixteen Personality Factor Questionnaire (16PF)*

*Thematic Appreciation Test (TAT)*

\* The two personality tests indicated by the asterisk (\*) are intended for use with clients under age 18. If mental health documentation has been completed within the last 12 months, results from these two inventories may be acceptable. However, evaluators should not use these for clients over 18 when updating an evaluation.

### **4. Anxiety/Depression- Acceptable instruments may include, but are not limited to, the following:**

*Anxiety Sensitivity Index (ASI)*

*Beck Depression Inventory II (BDI-II)*

*Patient Health Questionnaire (PHQ-9)*

*Satisfaction with Life Scale (SWLS)*

*State-Trait Inventory for Cognitive and Somatic Anxiety (STICSA)*

*Perceived Stress Reactivity Scale (PSRS)*

*The Yale-Brown Obsessive Compulsive Scale (Y-BOCS)*

### **5. Eating Disorders**

*Eating Disorder Examination-Questionnaire (EDE-Q)*

### **6. Sleep**

*Insomnia Severity Index Test*