



Larkin School of Nursing Medical Disability Documentation Guidelines

The purpose of this document is to outline the minimum documentation standards required for students requesting reasonable accommodations based on a medical or physical disability. These guidelines assist the Office of Disability Services in determining eligibility and ensuring that accommodations are appropriate, equitable, and compliant with applicable federal and state regulations.

Qualified Professional

Documentation must be completed by a licensed and appropriately credentialed professional qualified to diagnose and treat the specific medical condition. A qualified professional must have (1) comprehensive training and relevant expertise in the specialty and (2) appropriate licensure/certification. Professionals such as physicians, surgeons, optometrists, audiologists, occupational and physical therapists, neurologists, and other health and learning specialists, must provide documentation within their areas of expertise. Professionals should utilize the most recent evaluation tools available in the profession. Professionals who render a diagnosis outside of their area of expertise will not be considered in support of accommodation. Comprehensive documentation may include reports from several professionals or a team. Evaluations and diagnoses from family members, even when the family member is a qualified professional, will not be accepted for professional and ethical reasons. Reports must be typed in English, on professional letterhead, signed, and include professional credentials, licensure, specialization, and contact information.

Medical / Physical Disabilities Documentation

Medical or physical disabilities include, but are not limited to chronic medical conditions, physical impairments, traumatic brain injury (TBI), and visual, hearing, mobility, or manual limitations. When a physical or medical disability occurs in combination with attentional, psychiatric, or learning disorders, relevant documentation addressing the impact of these conditions on the academic environment must also be provided.

Major Life Activities

Examples of major life activities include walking, sitting, standing, seeing, hearing, speaking, breathing, learning, working, caring for oneself, and performing manual tasks.

Required Components of Documentation

All medical documentation must be Qualified, Current, and Comprehensive.

Currency of Documentation

Learning disabilities: completed within the past three (3) years.

Medical or physical disabilities: completed within the past six (6) months.

For permanent or long-term conditions, older documentation may be accepted with a current update addressing present functioning.



Reasonable accommodations are determined based on the current functioning of the individual. This cannot be determined without recent documentation. All instruments used by an examiner must be the most recent version at the time of testing to be considered current. Discretion by the director may be used in accepting documentation for some permanent conditions. In cases where the disability is long-term, comprehensive documentation may be submitted that is older but a recent evaluation update by the treating professional is required. For example, the diagnosis of Tourette's syndrome may have occurred in childhood. In this case, documentation should be submitted from the initial diagnosis as well as a report from a qualified professional documenting the current symptoms, levels of functioning, treatment, and medications.

Comprehensive Documentation Requirements

Documentation must include:

1. A specific diagnosis with supporting diagnostic methods and current functional limitations.

Doctors and professionals should identify the tests, measures, or assessments used to determine the diagnosis and clearly outline the results of their evaluation. Professionals should identify a description of the current symptoms, the duration of the symptoms, and the severity of the symptoms of limitations. Language that lists all of the potential symptoms without addressing the specific condition of the individual may not be justification for accommodation. A description of current functional limitations as it applies to the academic environment. The description should include medical information describing the degree to which the current functional limitations restrict the condition, manner, or duration under which the student can perform a major life activity. It is imperative that professionals be detailed and explicit when describing the current functioning of the individual.

2. Medication and treatment information impacting academic performance.

Many individuals often benefit from pharmacological treatments or therapies; however, this alone does not justify the need for accommodation.

3. Description of academic impact in the current learning environment.

A prior history of accommodations, without demonstration of current need, does not in and of itself warrant the provision of accommodations.

4. Evidence alternative explanations were ruled out.

For example, alternative explanations may include substance abuse, medication effects, and motivational factors affecting performance/functioning.

5. Rationale linking each accommodation to functional limitations.

The medical professional should describe (1) the degree of impact of the disorder on a specific major life activity, and (2) the degree of impact on the individual. There must be a clear link



between the accommodations and the functional limitations of the individual that directly applies to the academic environment.

6. Accommodations that result in a fundamental or substantial alteration of the nature of the educational program and are not reasonable as a matter of law and will, therefore, not be granted.

Determination of Accommodations

Accommodations are determined based on current functional limitations and essential program requirements. Accommodations are not retroactive.

Contact Information

Office of Student Services:

Phone: 305-284-7723

Email Student Services: Yulisa Nunez <yulisan@larkinhospital.com>

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