

FORDHAM UNIVERSITY SCHOOL OF LAW

DOCUMENTATION GUIDELINES FOR ATTENTION DEFICIT/ HYPERACTIVITY (AD/HD) DISORDER

Fordham Law School's Disability Services facilitates equal access for law students with disabilities by coordinating accommodations and support services and cultivating a campus culture that is sensitive and responsive to the needs of students. The following Guidelines are provided to assist students who intend to request accommodations or services on the basis of AD/HD. Students are encouraged to carefully read these Guidelines and share them with their evaluators.

Neuropsychological or psychoeducational assessments are needed to determine the current impact of AD/HD on the student's academic functioning. Because of the challenge of distinguishing normal behaviors and developmental patterns of adolescents and adults (e.g., procrastination, disorganization, distractibility, restlessness, boredom, academic underachievement or failure, low self-esteem, chronic tardiness or non-attendance) from clinically significant impairment, a multifaceted evaluation should address the intensity and frequency of the symptoms and whether these behaviors constitute an impairment which substantially limits a major life activity.

1. The evaluation must be current.

- While AD/HD is generally considered to be a lifelong condition, because the provision of all reasonable accommodations and services is based upon the assessment of the current impact of the student's disabilities on his/her academic performance, it is necessary to provide current documentation
- The tests must have been administered within the past four years
- A summary of past testing is insufficient documentation

2. A comprehensive evaluation report must include:

- Confirmation that the evaluation was undertaken by a qualified evaluator who is unrelated to the student by birth or marriage. Qualified evaluators include clinical or educational psychologists, neuropsychologists, or physicians known to specialize in AD/HD
- Evaluator's professional credentials, including licensing and certification and areas of specialization on official letterhead (with addresses, phone, fax number, and email addresses)
- Dates of testing. It is necessary that psychometric testing be utilized to demonstrate attentional disorders
- Results based on the administration of the most recent addition of each assessment instrument
- An appendix listing all scores obtained during the course of the evaluation, including scaled and percentile scores, even if the evaluator has reported scores embedded in the report

- Comparison to the norm-reference group (e.g. how the student performs in relationship to the average person in the general population)
- A diagnosis made using the American Psychiatric Association's Diagnostic and Statistical Manual – V (DSM-5). Based on the current predominant features, the appropriate sub-type should accompany the diagnosis. Please also note that a clinical diagnosis of AD/HD or related prescription of medication **does not** necessarily justify the provision of accommodations.
- Administration of psychiatric, personality and behavioral assessments based on the student's presentation and/or history including but not limited to the Beck Depression Inventory, Beck Anxiety Inventory and the MMPI

3. Clinical summary and comprehensive history of presenting problems must be included which:

- Demonstrates that AD/HD currently and substantially limits major life activities
- Describes the extent to which these limitations impact the student in an academic context, such as courses, programs, services or any other activity at the University for which accommodations are being requested, with or without the use of mitigating measures
- Describes any record of prior accommodation(s), including any information about specific conditions under which the accommodation(s) were used such as standardized testing, final exams, licensing or certification examinations
- Includes a comprehensive history of presenting problems associated with the disability as well as information on the student's medical, developmental, educational, and family history as well as the date of diagnosis, duration, and severity of the disability including but not limited to:
 - Clinical summary of objective historical information, establishing symptomology indicative of AD/HD throughout childhood in more than one setting (as per criteria in the American Psychiatric Association's Diagnostic and Statistical Manual -5 (DSM-V), adolescence and adulthood as garnered from transcripts, report cards, teacher comments, tutoring evaluations and past psycho-educational testing as well as third party interviews when available
 - Relevant medication history. Updates should be provided when relevant changes in behavior or medication occur which impact academic performance or cognitive skills.
- Shares relevant observations of behavior during testing including observations of behavior during the diagnostic evaluation which may help to form a diagnostic impression when combined with the clinician's professional judgment and expertise
- Recommendations for academic or other accommodations, including a rationale for each, linked to specific test results

4. The following areas must be addressed using standardized instruments:

Aptitude/Cognitive Ability: A complete intellectual assessment including all subtests must be included

- The Wechsler Adult Intelligence Scale IV (WAIS-IV), The Woodcock-Johnson IV (WJ-IV) Tests of Cognitive Ability and the Stanford-Binet Intelligence Scale-V are acceptable measures
- Brief versions or screening measures which are not comprehensive, including the Kaufman Brief Intelligence Test, Second Edition (KBIT-2) and the Slosson Intelligence Test-Revised are not accepted

Achievement: Comprehensive academic achievement must be assessed through the administration of a complete standard battery in the following areas:

1. Reading (decoding and comprehension)
 2. Mathematics (calculation and problem solving)
 3. Oral language
 4. Written expression (spelling, punctuation, capitalization, writing samples)
- Evaluators should further probe student's reported areas of weakness (e.g. written expression) with additional relevant tests, if the standard battery does not sufficiently demonstrate the student's functional limitations
 - The Woodcock-Johnson IV (WJ-IV) Tests of Achievement, The Scholastic Abilities Test for Adults (SATA), The Stanford Test of Academic Skills 10 (TASK 10) and The Wechsler Individual Achievement Test - III (WIAT-III) are acceptable measures
 - Please note that the Wide Range Achievement Test 4 (WRAT-4) and the Peabody Individual Achievement Test are **not** comprehensive measures of achievement and therefore should not be the only measure of overall achievement utilized

Cognitive and Information Processing: Specific areas of cognitive and information processing must be assessed including, but not limited to, the below domains. Assessment selection should be based on student's presentation:

- Memory: Visual and verbal acquisition, retrieval, retention, and recognition
 - Examples of acceptable measures include, but are not limited to California Verbal Learning Test (CVLT-II), Halstead-Reitan Neuropsychological Test Battery, WAIS-IV Working Memory Index (WMI), Wide Range Assessment of Memory and Learning - Second Edition (WRAML-2), Wechsler Memory Scales — Fourth Edition (WMS-IV), WJ-IV Tests of Oral Language (if not assessed through the Achievement Battery)
- Processing speed and cognitive fluency: Timed psychomotor or graphomotor tasks, decision and naming fluency
- Sensory-perceptual functioning: High-level visual, auditory, and tactile tasks
 - The Bender-Gestalt Test is an example of an acceptable measure
- Executive functioning: Planning, organization, prioritization, sequencing, self-monitoring
 - Examples of acceptable measures include, but are not limited to the Delis-Kaplan Executive Function System (DKEFS), Stroop Color and Word Test, Trail Making Test Parts A and B, Tower of London DX, Second Edition (TOLDX-2), Wisconsin Card Sorting Test (WCST).
- Motor functioning: Tests of dexterity and handedness

- Examples of acceptable measures include, but are not limited to the Rey-Osterrieth Complex Figure Test (ROCF) and the Grooved Pegboard Test

5. Objective and Subjective Measures of Attention:

- Visual and auditory spans of attention, scanning tasks and vigilance assessment, including continuous performance tasks
 - Examples of acceptable measures include, but are not limited to the Test of Variables of Attention, Version 8 (TOVA8) and the Conners Continuous Performance Test 3rd Edition (CPT-3)
- Self-rated or interview-rated scales for categorizing and quantifying the nature of the impairment
 - Examples of acceptable measures include, but are not limited to ADHD Rating Scale IV (ADHD-RS), Beck Depression Inventory-II (BAI-II), Brown Attention-Deficit Disorders Scale (Brown ADD Scales), Revised June 2015 3 Conners' 3rd Edition (Conners 3), Conners Adult ADHD Rating Scales – Self and Observer forms (CAARS), The Attention Deficit Disorder Evaluation Scale, Fourth Edition (ADDES-4): Home and Self Report versions, and the Wender Utah Rating Scale (WURS), Behavior Rating Inventory of Executive Function (BRIEF)

Multiple Diagnoses

Multiple diagnoses may require a variety of accommodations beyond the typical accommodations associated with just a single diagnosis. For this reason, documentation shall meet the individual guidelines for each condition. For example, if an individual has a hearing impairment accompanied by ADHD, the individual will need to provide documentation for both physical conditions and ADHD.

Submitting Documentation

Documentation should be submitted via email (amontez@fordham.edu) to the attention of Abel Montez, Director, Fordham University School of Law, Disability Services, 150 West 62nd Street, Room 4-101E, New York, NY 10023. Tel: 212-636-7955.

Documentation may be submitted via fax at (212) 636-7167 (but please contact Mr. Montez before doing so).

Please note: The Law School reserves the right to require that a certified copy of the evaluation be transmitted directly from the evaluator to the Disability Services Office. Disability Services will make the final determination of eligibility for accommodations.