

Asperger's and Autism Spectrum Disorders Documentation Guidelines

The following guidelines are designed to provide students and professional diagnosticians with a common understanding and knowledge base of the components of documentation which are necessary to validate the existence of an Autism Spectrum Disorder, including Asperger's, its impact on the individual's educational performance, and accommodation(s) that are necessary in the post-secondary setting. Clinical documentation should be comprehensive in order to avoid or reduce time delays in decision-making related to eligibility and the provision of services.

Documentation Requirement Checklist

In order for Student Disability Services to determine eligibility for specific accommodations, documentation **must** include the following information, as appropriate:

Qualifications of the Evaluator

- The professional conducting the evaluation and making the diagnosis must be qualified to make the diagnosis, make recommendations as to necessary accommodations and have direct experience working with an adult population.
- The documentation must include the name, title, and professional credentials of the evaluator, including information about licensure and/or specialization.

Current and Age-Appropriate Evaluation Data

- Since reasonable accommodations are based upon the assessment of the current impact of the disorder on academic functioning; evaluation/diagnostic reports must address the individual's current level of functioning and the need for accommodations.
- If the documentation is inadequate in scope or content, or is not relevant to the individual's current functional impairments and need for accommodations, additional information may be required.

History of Impaired Communication, Social and Academic Functioning

- Because Asperger's and other pervasive developmental disorders are commonly manifested during childhood (though not always diagnosed), historical information regarding the individual's academic history and communication/behavioral/social and/or learning problems in elementary, secondary, and post secondary education should be documented and provided.

Records/Information that Support a History of Impaired Functioning

- **It is important to demonstrate the history of functional impairment by providing objective historical records and information.**
- Examples of historical records include, but are not limited to, previous psycho-educational evaluation reports, written comments from present and past teachers, documentation from past tutors and/or learning specialists, Individualized Education Plans (IEPs), 504 Plans, report cards, college transcripts, etc.

Necessary Components of a Comprehensive Evaluation/Diagnostic Report

- Relevant social, behavioral, sensory and communication data
- Severity of the disorder.

- Relevant academic data including past evaluations, academic history, review of any special academic programs/tutoring, review of approved academic accommodations, etc.
- Specific objective measures used to help substantiate the diagnosis.
- A detailed description of the student's current; 1) communication/language skills; 2) ability to interact socially; 3) restricted, repetitive and/or stereotyped patterns of behavior, activities and sensory functioning; 4) sensitivity to environmental conditions, 5) motor planning etc. Evidence to support these statements should include results of aptitude and achievement testing, standardized tests of language skills and standardized scales of symptoms related to autism; as well as clinical observation including level of severity.
- The student's **current substantial limitations** resulting from Asperger's Disorder including communication skills, social/emotional functioning and functioning in the living and academic environment in the post-secondary setting.
- **For students who wish to receive consideration for academic accommodations, the evaluator MUST provide relevant academic performance data including results of aptitude and achievement standardized tests.***
- Relevant information regarding current treatment.
- Relevant medical information relating to the student's Asperger's Disorder including a description of the impact any prescribed medications or medication side effects have on the student's ability to meet the demands of the postsecondary environment.
- **A Specific Diagnosis** based on the Diagnostic and Statistical Manual-Fourth Edition (DSM-IV) and include classification code(s). Evaluators are encouraged to cite the specific objective measures used to help substantiate the diagnosis. The evaluator should use definitive language in the diagnosis of an Asperger's Disorder, avoiding such wording as "suggests or has problems with."

***Discussion of Evaluation Results (reported as standard scores and/or percentile scores)**

Both aptitude and academic achievement **must** be evaluated and included in the test report. The following tests are considered acceptable:

- **Aptitude.** The Wechsler Adult Intelligence Scale with subtest scores is the preferred instrument.
- **Achievement.** Current levels of functioning in reading, mathematics, and written language are required.

Ruling out Alternative Diagnoses

- This process should include exploration of possible alternative explanations for substantial limiting problems resulting from neurological conditions and/or educational, language and cultural factors impacting the individual that may result in behaviors mimicking a Asperger's or other pervasive developmental disorder.

Recommendations

- Specific recommendations regarding academic accommodations, auxiliary aids and/or services including a rationale for each accommodation recommended based on the individual's identified functional limitations.

NOTE: Please complete and return the **Student Intake Form** and the **Release of Information Form** with your documentation.