

DOCUMENTATION GUIDELINES

AUTISM SPECTRUM DISORDER

Students requesting accommodations because of an Autism Spectrum Disorder (ASD) must provide documentation by a qualified professional, a person who is licensed or otherwise properly credentialed and possesses expertise in the disability for which modifications or accommodations are sought. Documentation must provide evidence of a disability, and the evaluation must have occurred after the student reached the age of 13.

A school plan such as an IEP or 504 Accommodation Plan is insufficient documentation without the background information from which the plan was written. Clinical chart notes and/or printed electronic records from the provider's patient portal are also insufficient. Testing instruments normed for use with adults are preferred. A history of accommodations does not in itself warrant the provision of similar accommodations at Trenholm State Community College. The final determination of appropriate and reasonable accommodations rests with Trenholm State Community College.

Documentation must include, but is not limited to, the following elements:

1. MEASURES SPECIFIC TO AUTISM SPECTRUM DISORDERS

(a) Parent/Caregiver diagnostic interview assessing the three (3) areas of difficulty associated with ASD, including social and interaction skills, verbal and nonverbal conversation skills, and obsessive interests and/or repetitive behaviors. The Autism Diagnostic Interview-Revised (ADI-R) is the preferred interview but unstructured diagnostic interviews covering these areas would be accepted.

(b) Structured interaction and observation of the student's social and interaction skills, verbal and nonverbal conversation skills, and obsessive interests and/or repetitive behaviors. The Autism Diagnostic Observation Schedule (ADOS) is the preferred instrument but other structured observation of these skills would be accepted.

(c) An ASD-specific behavioral/skill checklist, such as the Social Responsiveness Scale, Social Communication Questionnaire, Gilliam Autism Rating Scale, or Gilliam Asperger's Disorder Scale.

2. DIAGNOSTIC INTERVIEW

The interview must relate a description of the presenting problem(s); developmental, medical, psychosocial and employment histories; family history (including primary language of the home and the student's current level of English fluency); a discussion of comorbidity where indicated; and relevant information regarding the student's academic history.

3. ASSESSMENT

For the evaluation to illustrate a substantial limitation to learning, the comprehensive assessment battery must address the following domains:

(a) Aptitude / Cognitive Ability

An assessment of global intellectual functioning is required, as measured by the **latest version** of **one** of the following acceptable instruments. **Subtest and standard** scores must be reported:

- Wechsler Adult Intelligence Scale. The WAIS is the preferred instrument.
- Woodcock-Johnson Psychoeducational Battery –Tests of Cognitive Ability.

If using the WJ-COG, the GIA must be reported.

- Stanford-Binet Intelligence Scales

Unacceptable Instruments

- The Kaufman Brief Intelligence Test (KBIT) is not a comprehensive measure and is therefore not suitable.
- Wechsler Intelligence Scale for Children (WISC) – this instrument is not standardized for use on adults, but will be considered on a case-by-case basis

(b) Academic Achievement

A comprehensive achievement battery with subtest and standard scores, indicating current level of functioning in the academic areas of reading, math, oral and written language, must be included, as measured by the latest version of one of the following achievement batteries:

Acceptable Instruments

- The Woodcock-Johnson Psychoeducational Battery –Tests of Achievement
- Wechsler Individual Achievement Test (WIAT)
- Specific achievement tests such as the Test of Written Language (TOWL), Woodcock Reading Mastery Tests – Revised, the Nelson-Denny Reading Tests or the Stanford Diagnostic Mathematics Test.

Unacceptable Instruments

- The Wide Range Achievement Test (WRAT)
- Mini Battery of Achievement (MBA)

(These are **not** comprehensive measures of achievement and are therefore not suitable for documentation purposes at Trenholm State Community College.)

(c) Adaptive Behavior Assessment of current level of adaptive/daily living skills.

(d) Comorbid Assessment

Assessment of symptoms of comorbid diagnoses, including symptoms of inattention, hyperactivity, anxiety, and depression.

4. DIAGNOSIS

(a) A clear and specific statement that the student is diagnosed with an ASD as per the DSMV (including diagnostic codes).

(b) Description of symptoms related to the diagnosis which indicate the nature, frequency and severity of the symptoms that the student experiences.



(c) Date of original diagnosis, if known, and last contact with the student.

5. MEDICATIONS

Prescribed medications, dosages, schedules and side effects that may influence the type of accommodations provided should be addressed. Medication alone cannot be used to support a diagnosis.

6. CLINICAL SUMMARY

- (a) The **substantial limitations** to major life activities posed by the disability.
- (b) The extent to which these limitations would impact the academic context for which accommodations are being requested.

7. ADDITIONAL REQUIREMENTS

- (a) All reports must be in narrative format, **typed**, signed by the diagnosing clinician, and must include the names, titles and professional credentials of the evaluators as well as the date(s) of evaluation.
- (b) Documentation must be submitted on the official letterhead of the professional diagnosing the disability.